DOCUMENT RESUME

ED 232 320 EC 152 585

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TITLE "Is There Anybody Here Who's Perfect?" An Educator's Guide to Understanding People with Disabilities.
SPONS AGENCY Ontario Ministry of Tourism and Recreation, Toronto.
PUB DATE Sep 82
NOTE 119p.; A project for the International Year of Disabled Persons.
AVAILABLE FROM Ontario March of Dimes, 90 Thorncliffe Park Dr., Toronto, Ontario M4H 1M5, Canada ($5.50, in Canada; $6.00 in
PUB TYPE Guides - Classroom Use - Guides (For Teachers) (052) -- Reference Materials - Bibliographies (131) -- Reference Materials - Directories/Catalogs (132)

EDRS PRICE MF01/PC05 Plus Postage.
DESCRIPTORS Accessibility (for Disabled); Class Activities; Discussion (Teaching Technique); *Emotional Disturbances; Foreign Countries; *Hearing Impairments; Information Needs; *Mental Retardation; *Peer Acceptance; *Physical Disabilities; *Visual Impairments

ABSTRACT

Classroom ideas and resource information for teachers in the areas of visual, hearing, and mobility impairments; developmental handicaps; and mental illness are presented. For each disability three topics of discussion are introduced to help the student understand individuals who have the disability. The first discussion area deals with the personal experience of having a particular disability, including everyday functions (e.g., dressing, shopping) and special equipment. The second area concerns the movement/activities of the disabled in the community, the choices and barriers they face, and the kinds of special services that help them surmount the barriers. The third area is designed to help the nonhandicapped person feel more comfortable when meeting the handicapped and to enable them to be most helpful to the handicapped person. For each section, there are true-false statements, questions to stimulate discussion, and activities to enhance the learning experience. In addition, resource information accompanies each of the five sections on disabilities. The resources include background information on the impairment, a glossary of terms and issues; and a listing of names of organizations, films by educational levels, and books by educational level. In addition, bibliographies of 20 general resources, 7 book lists, and 6 film resources are appended. (SEW)

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"Is There Anybody Here Who's Perfect?"

An Educator's Guide to Understanding People with Disabilities

Written by: Ann Goldblatt
Artwork by: Julie Markle

September, 1982
Toronto, Ontario.

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ACKNOWLEDGEMENTS

The inspiration and the research
conducted to develop this curriculum
guide lies in
no small degree with Joni Dulberg.

A number of people were consulted on particular portions
in the course of redrafting
the material and we are grateful for
their input:

Iris Boshes
Reg Foster
Kathy Lowinger
Scott McArthur
Steve McCahon
Joan Robinson

We are indebted to Pepi Lucas who
devoted several hours to reading and advising
the author on the entire copy and to Jerry Lucas
for his unrelenting support.

We gratefully acknowledge
the typing done by Naomi Nathans
and the intricate lay-out and revisions
prepared by Carol Pasternak.

CREDITS

The School Curriculum Guide "Is There Anybody Here Who's Perfect?" is a publication of Aid to Local Groups, a project for the International Year of Disabled Persons under the direction of the 1981 Ontario Coordinating Committee.

The 1981 Ontario Coordinating Committee is a cooperative venture of the following organizations:

Ontario Federation for the Physically Handicapped

Ontario March of Dimes

Canadian Hearing Society

Canadian National Institute for the Blind, Ontario Division

Ontario Association for the Mentally Retarded

Ontario Federation for the Cerebral Palsied

Canadian Mental Health Association, Ontario Division

United Handicapped Groups of Ontario

This project was made possible through a grant from the Ontario Ministry of Tourism and Recreation.

TABLE OF CONTENTS

How to Use This Curriculum Guide 1

Introducing the Guide to You, the Educator 2

Me, Myself and I - PART ONE 3

People in Motion - PART TWO 4

Getting Closer - PART THREE 5

Getting Started 6

Introducing ... People with Visual Impairments 7

- Me, Myself and I 8
- People in Motion 12
- Getting Closer 17
- Background Information on Visual Impairments 21
- A Glossary of Terms and Issues 22
- Resources 24

Introducing ... People with Hearing Impairments 26

- Me, Myself and I 27
- People in Motion 31
- Getting Closer 35
- Background Information on Hearing Impairments 39
- A Glossary of Terms and Issues 40
- Resources 43

Introducing ... People with Mental Illnesses 45

- Me, Myself and I 46
- People in Motion 50
- Getting Closer 55
- Background Information on Mental Illnesses 60
- A Glossary of Terms and Issues 61
- Resources 63

(cont'd)

TABLE OF CONTENTS

(Continued)

Introducing ... People with Physical Disabilities	64
Me, Myself and I	65
People in Motion	70
Getting Closer	76
Background Information on Physical Disabilities	80
A Glossary of Terms and Issues	82
Resources	86
Introducing ... People with Developmental Handicaps	89
Me, Myself and I	90
People in Motion	95
Getting Closer	100
Background Information on Developmental Handicaps	104
A Glossary of Terms and Issues	105
Resources	107
Bibliographies	109
Film Resources	110
Films	110
Book Lists	111
General Resources	112

HOW TO USE THIS CURRICULUM GUIDE

The sections have been written at an intermediate level and may be distributed as they appear or adapted to suit the teacher's needs.

The Responses to the True-False Dilemmas were written at a senior-reading level and are intended primarily for teacher's use.

Any equipment which would be needed to carry out the Activities has been underlined.

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INTRODUCING THE GUIDE TO YOU, THE EDUCATOR

This guide is
presented as a
s p r i n g b o a r d
for educators

Teachers who want to encourage the development of positive attitudes toward people with disabilities can add to the content of this guide from their experience and can adapt its use to the levels of their students.

The guide contains classroom ideas and resource information about people with visual, hearing and mobility impairments, about people who are developmentally handicapped and about people who experience mental illness.

Toward understanding people who have these disabilities, each area has been approached by way of three topics of discussion (colour coded):

PART ONE - Me, Myself and I, dealing with the personal experience of having a particular disability,

PART TWO - People in Motion, concerning the person as he/she moves out into the community, and

PART THREE - Getting Closer, prompting discussion on becoming aquainted with and effectively providing assistance to people with various disabilities.

An introduction to each of these discussion areas follows on pages 3,4 and 5.

For each section, there are "True-False" statements, questions to spark discussion and activities to enhance the learning experience. In addition, resource information has been compiled to accompany each of the five major areas in this guide.

Staff and students who wish to integrate this material into their programs will hopefully gain:

Heightened awareness of different disabilities, the barriers encountered and the aids employed,

a greater feeling of comfort in the company of people with disabilities,

and a sense of commitment to action which will help remove some of the barriers.

Understanding is a prerequisite to dispelling myths and the resulting change of attitude can lead to a just approach to people with a variety of needs.

ME, MYSELF AND I

When we see people with disabilities at school or at work, or when we pass by people in the street, we sometimes wonder what it is like to experience that disability. How does the person manage with basic things like bathing, getting dressed, shopping or eating? How does it feel physically to have a disability of one kind or another? What kinds of special equipment would that person require in their home?

The following are some introductory questions to help us start thinking about the everyday experience of having a disability. The more we understand, the more likely we are to feel comfortable when we come into contact with people with different kinds of disabilities.

1. Everyone's life is made easier because of technical aids (elevators, cars, chairs, to name a few). Look around the room you are in. What aids do you use everyday? What aids does your teacher use?

2. Do you know some of the aids used by someone who cannot see or by someone who cannot hear? What aids might be used by someone who has difficulty walking?

3. Can someone who has a physical disability and uses a wheelchair get married? Could they have children? Can someone with a developmental handicap get married and have children?

4. Some people with disabilities live alone and some live with a group of people (in a "group home"). What kind of help might someone need who lives alone? Do you think living alone would be better than living in an institution with many disabled people?

PEOPLE IN MOTION

We know that people with disabilities are not all sitting at home with nothing to do. Some people occupy themselves with things around the house, some people go to school, some to work and some take part in a variety of recreational activities.

What kinds of choices do people have? What kinds of barriers arise to being active in the community? What kinds of special services make it possible to get around some of these barriers?

The questions which follow will help us to start thinking about the ways in which people with disabilities occupy their time and the ways problems which may arise are sometimes overcome.

1. Is there a special transportation service for disabled people in your community? Why would this be important for going to work or school, for going shopping or for going to recreational programs?

2. What does it mean when we say that a building is "accessible"? Besides people in wheelchairs, who else might be pleased to be able to use a well-designed building?

3. What do we mean when we talk about "integrating" people with special needs? Why have people with disabilities been "segregated" in schools.....jobs....and recreation programs?

4. Do students with special needs belong in the regular classroom? How much help do you think students should receive from the teacher if they do their work in a different way from most of the class? How much help should be given to them by other students?

5. Why do people with disabilities often have more problems than others in finding a job? What difficulties might the disabled person encounter? What problems might there be for employers who are hiring for jobs?

GETTING CLOSER

It's hard to find a person who is perfect! Everyone has some kind of physical or emotional limitation; the difference is mainly a matter of degree.

Some people have disabilities about which we know very little. As a result, we don't always know the best approach when we come into contact with them.

These questions will help us start thinking about what could make us feel more comfortable when we meet people with different kinds of disabilities and what we could do to be most helpful.

1. How do people act when they meet people who have physical or emotional disabilities?

2. What is the difference between talking about "my deaf friend John" and talking about "John, my friend who is deaf"?

3. Were you ever in a situation where you didn't know if you should offer help to a person with a disability? Have you ever wanted to give assistance but did not know how to help? Could you ever be too helpful?

4. Why are some people afraid of someone who has a disability?

5. Why do some people stare or laugh at a disabled person? Why do some people look the other way?

6. Why should you let a person with a disability who is taking a long time to eat or to figure out the answer to a math question carry on when you know you could make it easier by doing it for them?

7. What are the different ways disabled persons have of accepting their own disabilities?

GETTING STARTED

1. When someone has a "disability" what does it mean?

2. Name as many kinds of disabilities as you know.
   Which are temporary and which are permanent?
   Which disabilities are invisible?

3. Do you know anyone with one of these disabilities?

4. Describe a disability you have or once had. Do/did you have any special problems because of it?

5. Do you think people wearing glasses or people who are short have disabilities?
   Do you think someone who can't sing in tune or someone who is uncoordinated at baseball has a disability?

   What is meant by the phrase "We <u>all</u> have disabilities"?

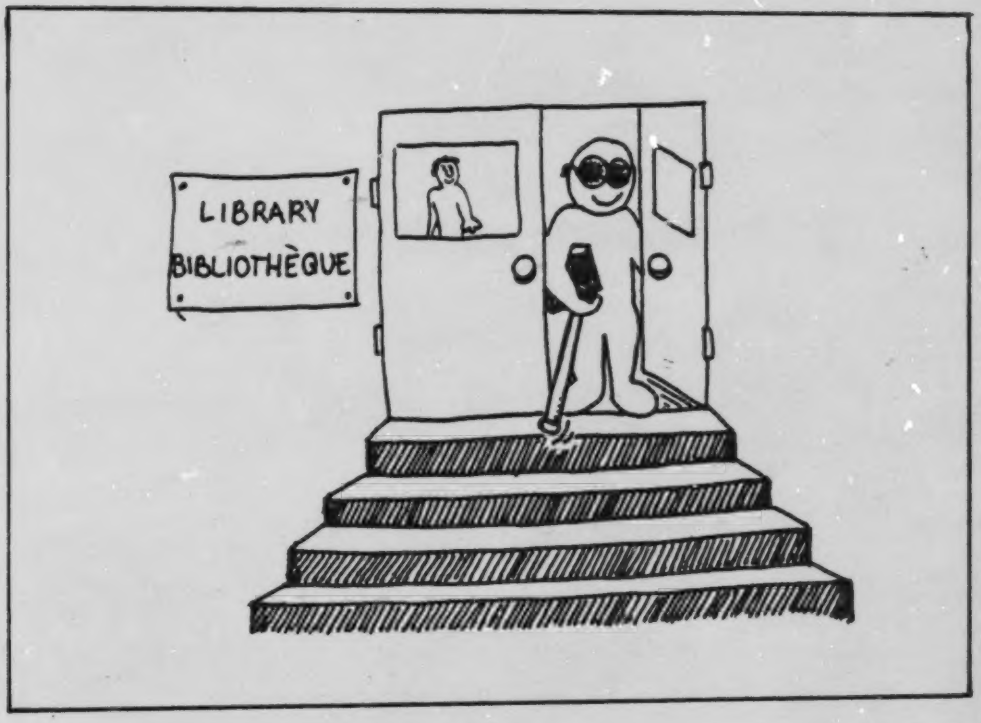
6. What is meant when we say people with disabilities have to face "barriers"?

   What do you think is the greatest barrier faced by someone who....

   has a visual impairment?
   has a hearing impairment?
   has a speech impairment?
   has a mobility impairment?
   has emotional problems?
   is developmentally handicapped?

Introducing...

People With Visual Impairments



TRUE OR FALSE OR A LITTLE OF BOTH??

1. Most people who are visually impaired are not "scared" to move around.

   t f both

2. People who cannot see have better hearing and a better sense of touch than those who can see.

   t f both

3. Many partially-sighted people can see some shadows and colours.

   t f both

4. Legally blind people have no use for glasses.

   t f both

5. It is possible for a person without sight to live alone in an apartment (cooking, cleaning, and shopping for themselves, etc.)

   t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. true

   People receive "mobility" training to assist them in learning how to move around with a white cane, with a guide dog, or with the help of a guide.

2. both

   The average sighted individual does not use their senses of hearing and touch to their full capacity. A person who is blind has no physical advantage in these senses but depends upon them more than sighted persons.

3. true

   This can apply to a large percentage of legally-blind persons.

4. false

   Legal blindness indicates having 20/200 vision or less. Glasses are helpful in some cases.

5. true

   Some people who are visually-impaired live in their own house or apartment and are able to buy and prepare food, take care of personal grooming and carry the responsibilities of cleaning and making necessary repairs in their home.

WHAT'S YOUR OPINION??

1. How would a person who cannot see,

   ... know which clothes match when getting dressed?

   ... tell the difference between 1, 5, 10 and 20 dollar bills?

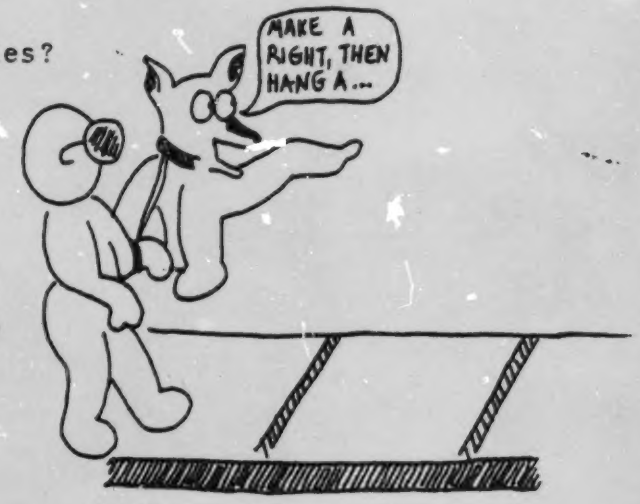
   ... go shopping for groceries?

   ... find their way

   to school,

   to work,

   or to a friend's house?



   ... know the time?

   ... know the weather?

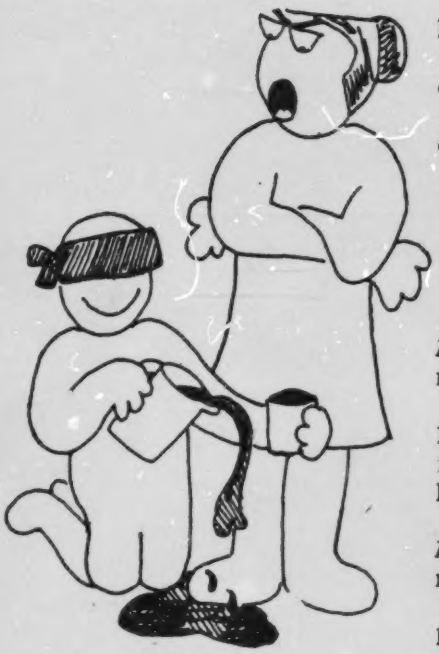
2. Is it important to be able to see?

   How would your life change if, starting tomorrow, you were no longer able to see?

3. Make a list of all of the technical aids which you think would be helpful for a person who is blind who wants to make a meal of:

   an orange
   a grilled-cheese sandwich
   sliced cucumbers and tomatoes, and
   a cup of tea with a teaspoon of sugar

ACTIVITIES



1. To experience performing tasks without being able to see,

Ask blindfolded participants to,
a. try to identify a number of objects by touch, smell and/or sound (e.g. spices, perfume, lemon, keys, watch, alarm clock)
b. try to pour liquid from a pitcher into cups and back into the pitcher
c. count out one dollar in change from a pile of coins
d. try to eat from a plate which has on it a variety of food items (e.g. peas, tomatoe, something which must be cut with a knife)

2. To experience mobility without being able to see,

Ask some participants to leave the room while a maze of chairs and tables is set up.

Participants re-enter blindfolded and try to navigate their way through the maze (with the help of a white cane, if available).

Ask different participants to walk through the maze once sighted and then blindfolded.

Have groups compare experiences.
Ask participants if they believe it would be easier to cope with blindness from birth or blindness after being able to see.
Does familiarity make you more or less inhibited to move around blindfolded?

3. To simulate different types of visual impairment,

Ask participants to divide into pairs and distribute to each pair one of the following:
a. paper tubes (tunnel vision)
b. glasses covered in front but open on the sides (peripheral vision)
c. goggles covered with paper towel or toothpaste (able to perceive light)

Assign tasks (see Activities 1 and 2) and have one person in each pair act as helper. Reverse roles. Compare experiences.

TRUE OR FALSE OR A LITTLE OF BOTH??

1. People who cannot see can work as teachers.

t f both

2. It is probably better not to invite a person who is blind to see a play or a movie.

t f both

3. A child who cannot see must attend a special school.

t f both

4. People who cannot read print can still read books.

t f both

5. People unable to see can only play baseball if someone is there to tell them when the ball is coming toward them.

t f both

6. People with visual impairments cannot travel alone by subway because they would not know when to get off.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. true

   Some people are capable of teaching children and adults but may find it difficult to find jobs because few people feel comfortable about giving them this responsibility.

2. false

   While some plays and films may be more appropriate than others because of their verbal content, people should be given the choice of joining you if they are interested.

3. false

   Some children who are visually-impaired attend a school for blind students (in Brantford, Ontario for Central Canada) while others are integrated into the regular school system. In the regular school, the student will require some special aids and assistance.

4. both

   About 10% of visually impaired persons can read braille, a system of 6 raised dots arranged in different ways to represent letters and numbers and formed by a brailler(typewriter) or stylus and metal slate. Others read books by listening to tapes or to readers.

5. false

   There is a bell which can be placed inside a baseball to alert a visually-impaired player to a ball's location. The bell system is also used for hockey.

6. false

   People use different cues to know where they are. The sound of the subway going in or out of the tunnels, counting the stops, asking others for assistance and a new system of a loudspeaker announcing the stops are all aids which enable the person to travel alone.

WHAT'S YOUR OPINION??

1. Can people who cannot see expect to be given equal consideration when applying for a job?

2. Do you think people with visual impairments prefer to go to parties where most or all of the people are visually impaired?

3. What would be the advantages and disadvantages of a blind student attending a school where most of the students were sighted?

4. Do you think most people who are unable to see stay at home more than others?

   If you think so, how would you explain this?

   Would travelling alone to new places be a major barrier?

ACTIVITIES

1. To experience the media through hearing only,

   Turn on a television program or a film without the picture.

   Ask participants what they think they missed and how they compensated.

   Watch the program again with the picture and compare experiences.

2. To develop an appreciation for reading without sight,

   Ask participants to study a chart of the braille alphabet (the pamphlet "The Six Dots" can be obtained from the C.N.I.B. with the raised lettering on it). Try to read a sentence in braille. Create tactile pictures on cardboard using yarn or string, dried beans and glue.

   Ask participants in small groups, to make a set of playing cards in braille.

   Ask participants using a brailler or slate and stylus to prepare name and address cards.

   Ask participants to make a braille menu; an offer could be made to a local restaurant to prepare menus in braille.

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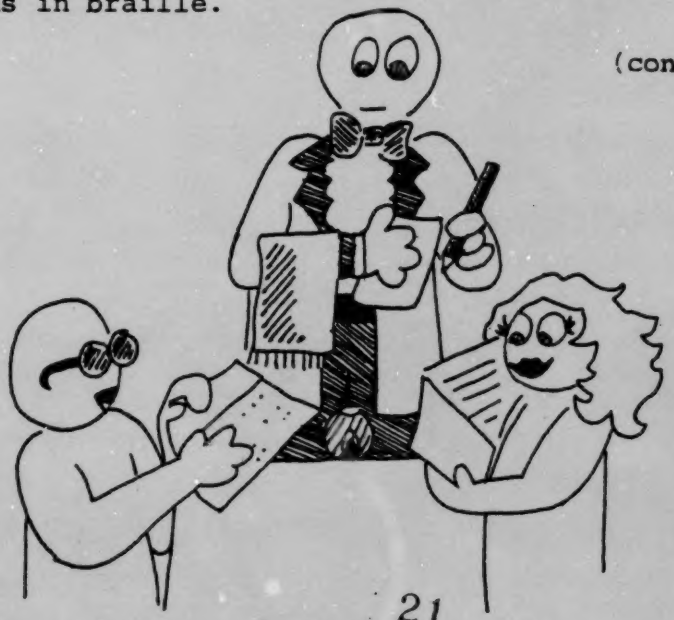


ACTIVITIES (cont'd.)

Form a reading service for the print handicapped in or outside the school (transcribing onto tape, into large print or braille, or being readers).

3. To appreciate the range of abilities of persons who are visually-impaired,

Interview people in your community and find out what they do with their time.

Study the lives of several famous blind persons (Helen Keller, Ray Charles, Stevie Wonder, José Feliciano) and discuss.

Read books or watch films about people who are blind.

Role play, with two volunteers, a blind person applying for a new job.

TRUE OR FALSE OR A LITTLE OF BOTH??

1. To be sure you don't make a person who is blind feel awkward, avoid words like "watch","see", and "look" in conversation.

t f both

2. In a restaurant, a waiter should ask a sighted person what his/her friend wishes to order if the friend has a visual impairment.

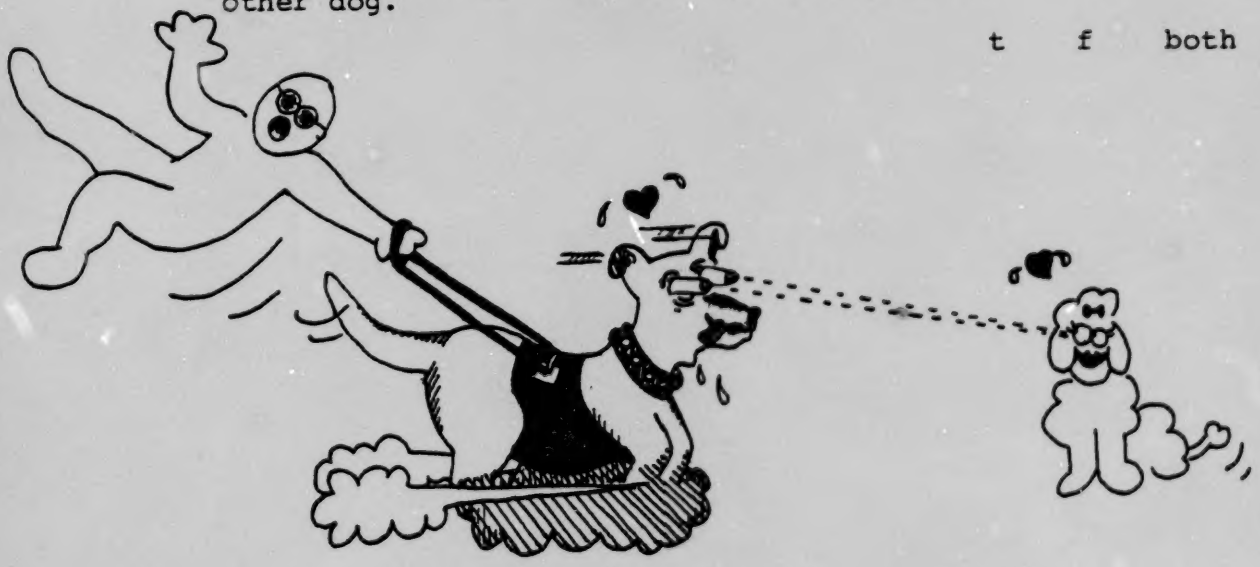
t f both

3. You can be sure your help is needed if you see a person standing at a street corner with a white cane.

t f both

4. A "seeing-eye" or "guide" dog on a harness can be patted by people passing by just like any other dog.

t f both



5. To help a person who is blind into a car, place their hand on the door.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. false

   People don't like to feel out of place. Being treated in the same way as everyone else makes a visually-impaired person and the people around them feel more at ease.

2. false

   Always address the person directly. The friend will say something if help is needed along the way.

3. false

   Avoid the impulse to rush to a blind person's aid. ASK IF YOUR HELP IS NEEDED and how you can be most helpful. Many people like to be as independent as possible.

4. false

   Seeing-eye dogs are working when on harness and could be distracted from protecting the blind person if patted or offered food by passers-by.

5. true

   This helps to orient the person. It is similarly helpful to place a person's hand on the back of a chair when they wish to be seated.

WHAT'S YOUR OPINION??

1. Why should you let someone who is visually-impaired do something difficult by themselves if you know you could easily help and do it faster than they?

2. Is it alright to ask a person who cannot see how they became visually-impaired or how it feels to be blind?

3. Do you expect people who are visually impaired to always be friendly and cheerful toward strangers who offer them assistance?

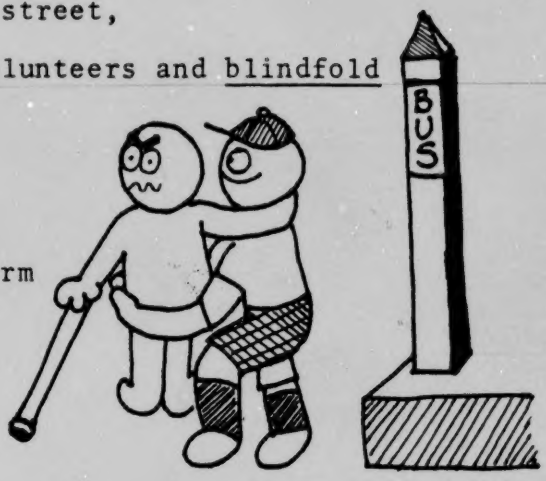
4. Why would a person who is blind <u>needing</u> help sometimes not ask for it?

ACTIVITIES

1. To demonstrate right and wrong ways of helping someone across the street,

   Ask for two volunteers and blindfold one.

   Demonstrate consequences of grabbing the person's arm and pulling them across the street.



   Inform the blindfolded person that he/she take hold of the guide's arm from behind, just above the elbow. The guide's arm is slightly bent and he/she is walking a little ahead of the visually-impaired individual. In this way, movements up and down can be sensed.

   Ask all of the participants to divide into pairs and simulate this situation.

2. Invite a person who is visually impaired to come into the class and to discuss and answer questions about how people can best approach him/her if they want to be helpful.

3. Ask students to make a list to follow this statement:

   If I could not see, I would want other people to.....

   .....

BACKGROUND INFORMATION

ON

VISUAL IMPAIRMENTS

Visual Impairments

- are caused by accident, by disease, by birth defect or by hereditary factors
- are defined as "legal blindness" where there is 20/200 visual acuity or less
- partially sighted refers to acuity of 20/70 to 20/200
- about 10% know and use Braille
- can sometimes be corrected by surgery
- two-thirds of blind persons are elderly
- cataracts are a clouding of the lens
- affect a child's ability to form accurate perceptions of himself or of the world around him/her

A GLOSSARY OF

TERMS AND ISSUES

- WHAT WE MEAN BY WHAT WE SAY -

Employment

- VISUALLY IMPAIRED persons are often skilled in in secretarial work, computer programming, switchboard and reception, radiography (x-ray technician)
- CAN also become trained in professions such as teaching, law, social work, administration
- MAY require some simple accommodation like a brailler (braille typewriter)
- HAVE good records as productive workers with low absentee rate

Independent Living

- VISUALLY IMPAIRED persons develop their own methods and are taught methods of making adaptations in order to function independently on a day to day basis
- MONEY (paper) is distinguished by folding down corners or by folding in different patterns
- TIME is known by a braille watch (raised dots for numbers can be touched by opening cover), braille clocks and talking clocks (mechanical voice states time at desired intervals)
- CLOTHES are matched by tags, pins or other tactile markings
- LIQUIDS are poured by cupping hand around glass or cup and, for cold liquids, inserting finger near the top to determine level; for hot liquids, temperature is sensed on the outside of the cup
- WEATHER can be sensed by warmth of sun or by sense of dampness

(cont'd)

GLOSSARY (cont'd.)

Seeing-Eye Dogs

- DOGS are specially selected and trained at seven U.S. schools from age of about 12 to 14 months for three months before being teamed up with blind master
- LEARN to recognize obstacles and will disobey a command which might place the master in a hazardous situation
- PERSON must be 18 years of age to receive a dog
- CAN be recognized by leather harness and U-shaped handle held in the master's left hand
- RESPOND to specific commands like "left", "right", "forward", "stop" but cannot see traffic lights or navigate unknown routes

Technical Aids

- BRAILLER and stylus and slate used for writing
- TAPE RECORDERS commonly used for reading books and taking notes
- FOOD CONTAINERS are labelled with braille print tape which can be stuck on
- PLATES placed under bowls during preparation of foods can minimize spillage

RESOURCES

Organizations

Canadian National Institute for the Blind
1929 Bayview Avenue
Toronto, Ontario M4G 3E8 (416) 486-2628

Blind Organization of Ontario with Self-Help Tactics
291 Yonge Street, Suite 200
Toronto, Ontario M5B 1R3 (416) 979-9621

Films

(Secondary)
Blind Sunday
31 Minutes (National Film Board)
Relationship between a blind girl and a young man she meets. He tries to understand her disability by putting on a blindfold for a day in her company.

(Elementary)
My Friends Call Me Tony
12 minutes (National Film Board)
Ten year old Tony is full of energy and very athletic. He has been able to see only shadows and lights since the age of three.

Books

(Elementary)
Heide, R., Sound of Sunshine/Sound of Rain,
Parent's Magazine Press, 1970

(Elementary)
Mathis, Sharon Bell, Listen For the Figtree,
Macmillan Co. of Canada, Toronto, 1974
Story of a black teenaged girl who is blind and how she deals with her disability and family problems, such as alcoholism. Problems require strength and determination to be overcome.

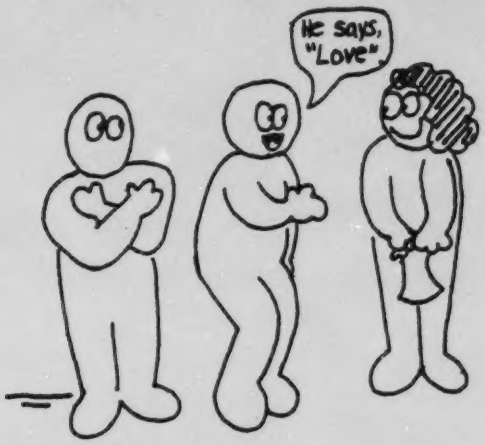
(cont'd)

RESOURCES (cont'd.)

(Adult)
Scott, Eileen P; Jan, James E; Freeman, Roger, Can't Your Child See?, University Park Press, Baltimore, 1977:
An adult book discussing diagnosis and types of eye disorders and raising a child with visual impairments.

Introducing...

People With Hearing Impairments



TRUE OR FALSE OR A LITTLE OF BOTH??

1. People wearing hearing aids are able to hear just as well as people without hearing problems.

t f both

2. All persons with hearing impairments can lipread.

t f both

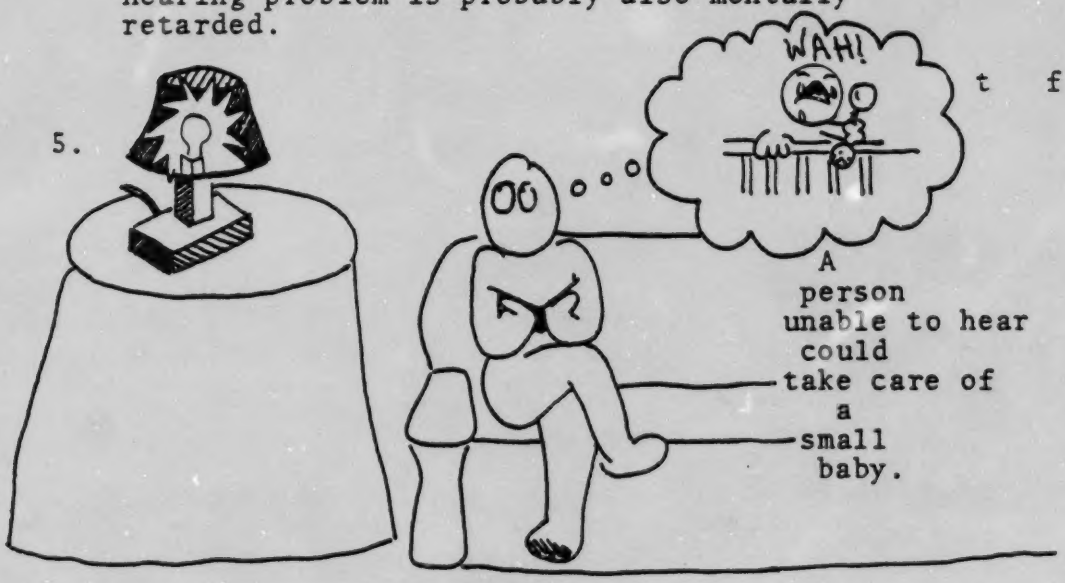
3. A person who has not been able to hear since birth can learn to talk.

t f both

4. A person who speaks differently because of a hearing problem is probably also mentally retarded.

t f both

5.



t f both

6. The telephone is not useful to someone with a severe hearing impairment.

t f both

7. The problem of not passing along sound waves, occuring in the middle or outer ear, can sometimes be corrected by surgery.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. false

   Hearing aids make sounds louder but do not make it possible for people to tune out background noises. There is an improvement but often not to a level of excellence.

2. false

   Some people are able to master lipreading but not everyone.

3. true

   If there is no impairment in the organs used for speech, some people can learn to form sounds which can be understood. It is more difficult, however, than for the person who becomes hearing-impaired after learning speech.

4. false

   The speech problems result from the person being unable to hear his/her own voice or that of others and not from mental retardation.

5. true

   There is a device called an "Optic Ear" which changes sounds into a visual cue. When a baby cries, for example, a microphone in the room would pick up the sound and it would cause a lamp to flash in the living room.

   The same device can be used to pick up sounds like a doorbell, the telephone ringing or a boiling kettle.

6. false

   A teletype (TTY) or Visual Ear enables a person to communicate by telephone. The person types a message onto a keyboard and the receiver can read the message on a small screen.

7. true

   This is called a "conductive disorder". The other disorder which affects the receiving of vibrations in the inner ear, is called "sensorineural" or "nerve deafness" and is usually irreversible.

WHAT'S YOUR OPINION??

1. How would you test someone's hearing in order to find out how well they hear?

2. What is sign language? What are the different kinds of sign language? Is it difficult to learn?

3. Do you think it would be easier to cope with deafness from birth or deafness after being able to hear?

4. Is it important to be able to hear? When you are at home, for which activities do you use or depend upon being able to hear?

ACTIVITIES

1. To simulate having different kinds of hearing impairments,

   Play the record "Getting Through" for students (Available from the Canadian Hearing Society)

2. To experience communication with full dependence on hearing,

   Show a film or television program with the sound turned off completely.

   Show the film again, adjusting the volume at various intervals.

   Turn up the volume of a radio and of a television/film simultaneously. Try to understand both of them.

   Ask for 5 volunteers. Two pairs carry on conversations and the fifth person attempts to

   a) understand what is being said by both pairs
   b) to distinguish the voices with his/her eyes closed

   Ask student to spend their lunch hour communicating without speaking.
   Teach a lesson without speaking.

   Discuss all of these experiences.
   How do people adjust to their hearing impairments?

3. To become familiar with alternative methods of communication,

   Provide a card with a short message on it to each person. Ask students to move around the room, conveying their message to different people using different approaches e.g. lipreading, finger spelling and sign language (provide charts available from Canadian Hearing Society).

   What is the most effective approach? Which is the fastest method?
   Did you get the message across exactly as it was intended?
   When would this be important?

TRUE OR FALSE OR A LITTLE OF BOTH??

1. People with very limited hearing need not worry about further hearing loss if they are working in a noisy factory.

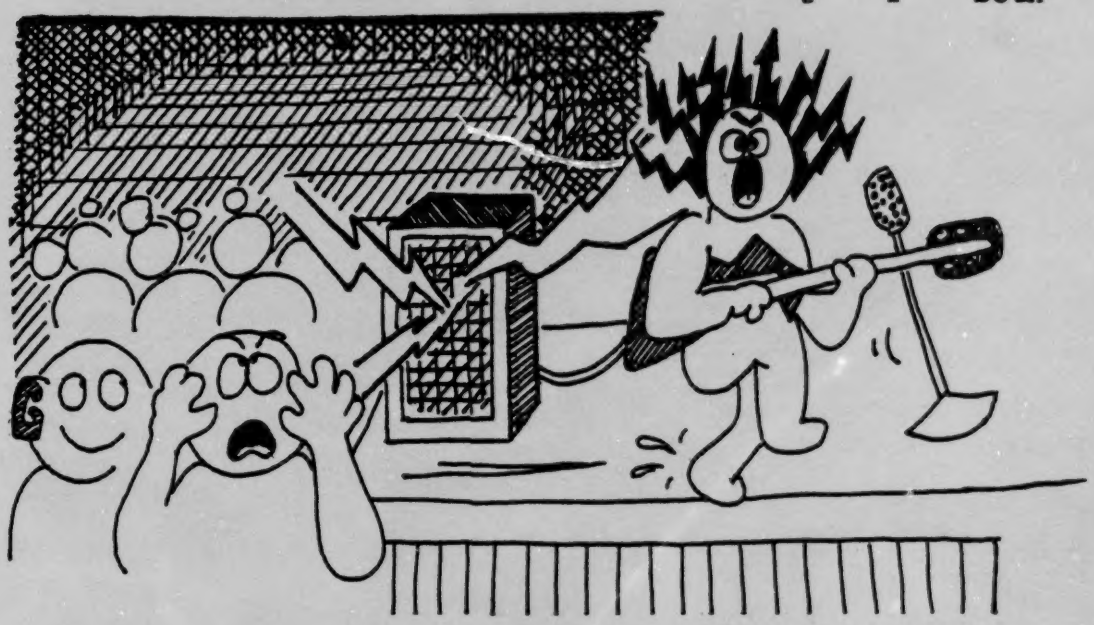
t f both

2. A hearing-impaired person can become employed as a teacher.

t f both

3. Never ask a person who is hearing-impaired to go to a concert or to a movie.

t f both



4. Children with hearing problems must go to special schools.

t f both

5. A person who cannot hear can drive him/herself to work in a car.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. false

   Further damage or pain can be caused by the presence of certain sounds.

2. true

   A hearing-impaired person can study in a hearing university to become a teacher. The aid of an interpretor may be required.

   This trained teacher could go on to teach students with hearing impairments or hearing students if communication was possible.

3. false

   Ask and let them make the choice of saying yes or no.

   Some people would want the opportunity to go out with other people and would appreciate the entertainment visually. Some theatres are being equiped with the "loop system" which enables those with hearing aids to hearing more easily.

4. both

   Some attend special schools while others study in a special class in a "hearing" school and/or are given extra assistance in a regular classroom.

5. true

   Hearing-impaired persons can get a driver's license and are reported to have excellent driving records.

WHAT'S YOUR OPINION??

1. Can you think of three situations where being unable to hear well might be an advantage?

2. Can a hearing-impaired person appreciate music? How?

3. A group of 100 persons has arranged to have a speaker and have extended an invitation to the general public. There is always a chance that one person may come who requires an interpretor.

   Should the group arrange for an interpretor just in case there is a need or is that too much to expect?

4. Check which of the following could contribute to noise pollution.

   music
   children
   broken mufflers on cars
   lawn mowers
   snowmobiles
   power saws
   dogs

5. Deaf persons can enjoy television if there is "closed-captioning" What does this mean? Is it available to people in your community?

33

ACTIVITIES

To become aware of the activities in which hearing-impaired persons may become involved,

Have students prepare interview questions concerning how persons with hearing-impairments fill their time (i.e. at school, at work, at home, in their spare time) and on what barriers they encounter.

Invite two people who are hearing-impaired to come to be interviewed by the class on separate occassions. Try to arrange for one of these people to be someone who requires an interpretor if one is available to come with them.

Study the lives of some famous persons who were hearing-impaired (e.g. Ludwig van Beethoven, Thomas Edison).

TRUE OR FALSE OR A LITTLE OF BOTH??

1. Facing a hearing-impaired person when speaking is the correct way to communicate.

t f both

2. If you yell at a person who is wearing a hearing aid, they will hear you better.

t f both

3. Calling a hearing-impaired person "deaf and dumb" could be taken as an insult.

t f both

4. If you, as a hearing person, don't know sign language, there are other ways to communicate with hearing-impaired persons.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. true

   When speaking with someone who is able to lipread, try not to turn your head or cover your mouth and speak slowly and distinctly. Do not exaggerate. Try also to have the hearing-impaired person facing away from a window so that the light is coming from behind them.

2. false

   Yelling can be painful for the person wearing the hearing aid (and for you!) and makes understanding more difficult.

3. true

   The word "dumb" often implies stupidity and is better replaced by "mute" meaning unable to speak.

4. true

   You can also make use of

   written messages
   finger spelling
   an interpretor
   the Personal FM System (you wear a portable microphone around your neck and the listener wears a hearing aid which amplifies your voice)
   or commonly understood gestures.

   IMPORTANT: Hearing-impaired people have preferred ways of communicating. ASK them to indicate their choice.

42

WHAT'S YOUR OPINION??

1. Do you know any elderly persons who do not hear well?

   How do other people react when asked to repeat things which were not heard the first time?

   How do you react when you are asked more than once to repeat yourself?

   How do you think you would feel if you were the person who couldn't hear what others were saying?

2. Do you think two people could become close friends if one could hear well and the other could not hear?

3. If someone has a hearing impairment, it is not something visible to another person. Do you think there is any difference in the way people would approach a person whose disability can easily be seen from one which is invisible?

4. Why do you think some people who are hearing-impaired feel that other people are making decisions <u>for</u> them?

ACTIVITIES

1. To simulate a situation where a person who is hearing-impaired needs help,

   Divide participants into pairs. The hearing-impaired person comes into a store to ask the storekeeper for directions to the train station.
   Role play alternative methods of giving the directions.
   How would you know if you were being understood?
   Ask the hearing-impaired person if he/she would be reluctant to ask for help? Why?

2. To become more aware of effective ways of communicating with people with hearing impairments,

   Ask for two volunteers to role play.
   One person is the waiter/waitress in a restaurant and the second is a customer at a table who is hearing-impaired.
   The waiter should keep several tips in mind in helping the customer understand him:

   a) seat the customer with his/her back to a window
   b) face the person directly
   c) find out if customer would like pencil & paper to communicate
   d) speak slowly; do not exaggerate words
   e) do not cover mouth when speaking
   f) rephrase rather than repeat comment not understood
   g) get their attention by a gentle tap on the arm
   h) do not seat the person near loud music or a noisy kitchen; a hearing aid amplifies all sounds and vibrations can be unpleasant

   Have students role play interchanges which do not observe these courtesies and discuss the consequences.
   Have students repeat the exchange but respecting these suggestions.

   Discuss the contrasts.

BACKGROUND INFORMATION

ON

HEARING IMPAIRMENTS

Hearing Impairments (approximately 10% of the population have some hearing impairment and 2.5% have impairment seriously affecting daily living.)

- are caused by hereditary factors, accidental damage or disease and are part of the aging process

- vary as follows:

	average hearing loss
Profoundly Deaf	80 decibels* or more in better ear
Severe Hard of Hearing	60
Moderate Hard of Hearing	40
Light Hard of Hearing	20

* Decibels provide a scale for intensity of loudness

- are Conductive or Sensorineural

1) Conductive disorders occur in the outer or middle ear where the sound waves are not being carried to the inner ear
   - loudness of sound is reduced
   - can often be corrected surgically

2) Sensorineural disorders occur in the inner ear where sound waves are not being received
   - loudness is reduced and sound is distorted
   - cannot be corrected surgically

- can sometimes be aided by a hearing aid

A GLOSSARY OF

TERMS AND ISSUES

- WHAT WE MEAN BY WHAT WE SAY -

Attitudes

- PUBLIC is often uncomfortable with a hearing impaired person's methods of communicating, particularly if speech sounds unusual
- LEAVING people out of the mainstream of conversation and activity is very common; people are impatient with an elderly person whose hearing is impaired
- HEARING persons frequently make decisions affecting the personal lives of hearing impaired persons.

Closed Captioning

- A SPECIAL DEVICE attached to television provides captioning to appear at the bottom of the TV screen his can connect hearing-impaired persons with the world around them
- NOW operates in Canada under the Canadian Captioning Development Agency
- IS TECHNICALLY limited in terms of number of persons who can receive the service

Communication

- NECESSARY for a wide range of daily activities e.g. calling a repair person, having a job interview, ordering food in a restaurant, going out for an evening with friends
- ONE or a combination of speech reading, lip reading, sign language, finger spelling or speaking
- TEACHING by Oral Approach (speech reading) or Total Communication (speech reading, sign language and speaking)
- SIGN LANGUAGE
  1) American Sign Language - a language of its own with symbols to represent phrases and words (A.S.L.)
  2) Signed English - follows syntax of English and represents every word in the proper order; uses more fingerspelling than A.S.L.

(cont'd)

GLOSSARY (cont'd.)

Communication (cont'd.)

- INTERPRETORS facilitate communication by using sign language between someone who is hearing impaired and someone who is not
- INTERPRETORS can be arranged free of charge through the Canadian Hearing Society (or, in Metropolitan Toronto, the Ontario Community Centre for the Deaf or Silent Voice Canada)
- ONE should speak directly to the other person, not to the interpretor, and at a normal rate

Elderly

- HEARING LOSS affects every 10th person over 65 and 4 out of 10 aged 75 or over
- HEARING AIDS can often mark the difference between isolation and involvement

Employment

- HEARING IMPAIRED persons are often skilled in trades such as auto body, machine shop, drafting, laboratory work, computer programming, accounting, electronics, typing and welding
- SOME are trained in professions such as library science, teaching and social sciences
- SUITED for jobs requiring a great deal of concentration
- SAFETY NOT A PROBLEM with proper orientation and instruction (vision and sense of vibration heightened)

Noise Pollution

- CONTINUOUS HIGH LEVEL NOISE can over time cause hearing damage
- CAN be controlled in industry and in residential areas
- CAN cause physical and emotional problems
- ALL of the causes of pollution listed in What's Your Opinion?? (page33) are valid

(cont'd)

GLOSSARY (cont'd.)

Prevention

- MAINTAIN good health
- EAR ACHES should be cared for by a doctor
- SHARP INSTRUMENTS should never be used in the ear
- HEARING should be tested by a professional in childhood if problems are suspected
- DON'T swim with a punctured eardrum
- LEARN to blow your nose gently and with only one nostril at a time
- A PREGNANT woman who suspects she has contacted Rubella early in pregnancy should see her doctor
- AVOID excessive noise

RESOURCES

Organizations

Canadian Hearing Society,
60 Bedford Road,
Toronto, Ontario, M5R 2K2 (416) 964-9595

Canadian Coordinating Council on Deafness,
294 Albert St.,
Ottawa, Ontario, K1P 6E6 (416) 232-2611

Silent Voice Inc.,
128 Danforth Avenue,
Toronto, Ontario. M4K 1N1 (416) 463-1104

Films/Records

(Elementary/Secondary)
Getting Through
15 minutes (record/tape; available from Canadian Hearing Society)
A valuable learning experience of the sounds heard by persons with various hearing impairments.

(Elementary)
I hear your hand
Give me a sign
3 minutes (Canadian Hearing Society)
Hearing-impaired persons signing two songs suitable for young children.

(Secondary)
The Truly Exceptional Tom and Virl Osmond
15 minutes (National Film Board)
A high-spirited film about the two eldest brothers of the singing Osmond family, both of whom are hearing impaired.

(Elementary)
Arthur, Catherine, My Sister's Silent World,
Children's Press: Chicago 1979
A simple story, with photographs, about a young girl and how she communicates in her various activities.

(cont'd)

RESOURCES (cont'd.)

(Elementary)
Litchfield, Ada B., Words in Our Hands,
General Publishing Ltd., Toronto, 1980
A simply, illustrated storybook about the child of parents who are deaf.

(Elementary)
Peterson, Jeanne, I have a Sister - My Sister is Deaf
Fitzhenry & Whiteside Ltd., Toronto, 1967
Soft, charcoal and pencil drawings accompany a story about a child who is hearing-impaired. The author emphasizes that she is alert, intelligent, sensitive and having the same interests as her peers.

50

Introducing...

People With Mental Illnesses

TRUE OR FALSE OF A LITTLE OF BOTH??

1. "Phobias" are fears of dangerous situations.

   t f both

2. It is possible for someone to suddenly become very depressed or very happy for several weeks even though nothing either good or bad has happened to them.

   t f both

3. People with emotional problems are able to take care of themselves and live in their own apartment.

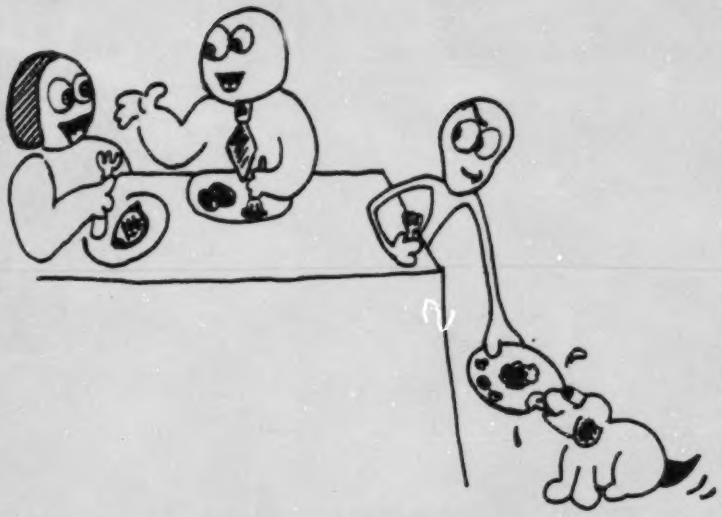
   t f both

4. A person's hands may shake (a tremor) only because of the side effect from the drugs they are taking.

   t f both

5. Not being hungry at all, overeating, and not being able to sleep are very common for people who have emotional problems.

   t f both



6. Having emotional problems and having problems in learning do not necessarily go hand in hand.

   t f both

RESPONSES TO THE TRUE FALSE DILEMMAS

1. false

   Phobias are fears of certain situations (e.g. of heights, of crowds, of open spaces) which are out of proportion to the danger which is actually involved.

2. true

   This common condition is called "manic-depression" and for the most part is caused by a chemical imbalance within the body which cannot be altered by willpower. Recent research suggests it is a genetic condition. Many persons have been successfully treated by the drug "lithium".

3. both

   Many people can continue to handle the responsibilities of taking care of themselves in their own homes though they may require some support from community services. Others lack the emotional stability to live independently. They may, instead, live in a group home with some supervision, with their families or a small percentage of persons may live in an institution.

4. true

   The side effects of the drugs are <u>not</u> part of the condition being treated. Sometimes, a second drug is taken to counteract the side effects of the first. Other possible side effects are dryness of the mouth and sensitivity to sunlight.

5. true

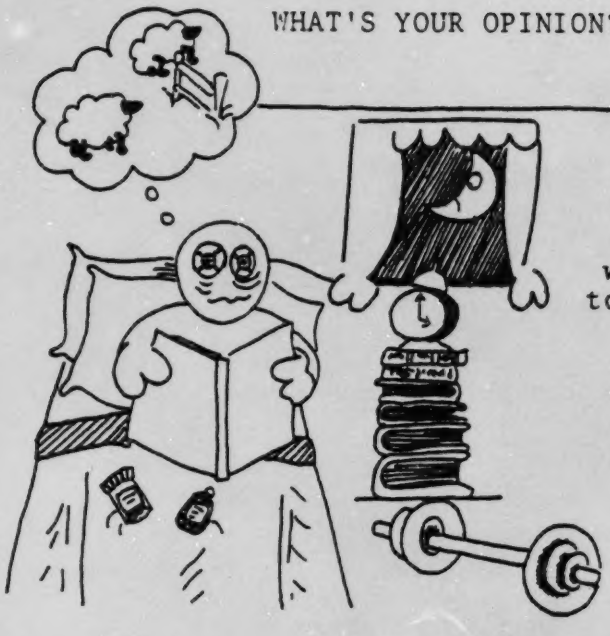
   If these signs continue over a long period of time or begin to impair a person's health or ability to function well from day to day, professional advice should be sought.

6. true

   Although some people with mental illnesses are also developmentally handicapped, most people do not have impaired intellectual abilities.

WHAT'S YOUR OPINION??

1. _____



Have you ever felt that people were purposely trying to frustrate you?

Has this left you unable to sleep, to eat or to concentrate?

How could you help someone to feel better if they told you they always felt this was happening to them?

2. Sometimes people are frightened around those who have obvious signs of mental illness. Why? Where do we pick up these ideas?

	YES	NO
From television?	____	____
From movies?	____	____
From our parents?	____	____
From our brothers & sisters?	____	____
From our friends?	____	____
From our teachers?	____	____

How can we improve this situation?

3. When you meet someone with a broken leg and crutches, you feel some sympathy and you can quite easily imagine what it is like for that person to have this problem. You also have a good idea about how best to help them.

When you meet someone with emotional problems, your reactions may be quite different. Can you explain why this if often true?

ACTIVITIES

1. To clearly identify the range of moods we all experience,

   Ask participants to divide a large piece of paper into 8 squares. Label each section as a day to day event (e.g. waking up, on the bus to school, in French class, at dinnertime, at a birthday party).
   Ask them to draw themselves in each situation, and to label the feeling expressed in the drawing.

   Make a collage of faces from magazines and newspapers which express these different moods.

   Ask students to bring in family photo albums and to identify the moods expressed in the photographs.

   Play a variety of musical numbers and ask students to record and then compare with others how the music makes them feel.

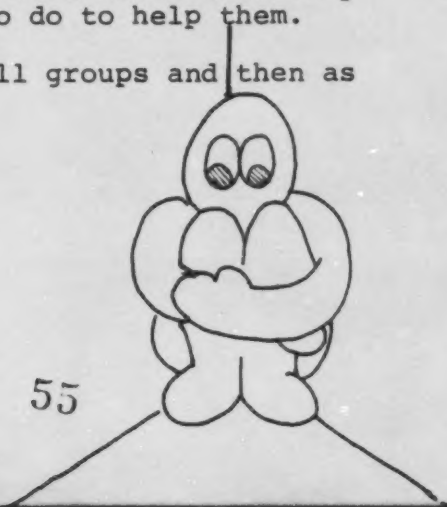
   Ask participants, what kinds of situations put you
   a) in a good mood ?
   b) in a bad mood ?

   How do you feel inside when you are
   a) angry ?
   b) sad ?
   c) happy ?

2. To experience some of the feelings which accompany withdrawal,

   Ask participants to sit on the floor with their knees up, heads down and arms wrapped around their knees for 5 minutes. Suggest, in a quiet voice, that they think about a time when they felt very alone, and how they felt. Ask them to think as well about what they would have wanted someone else to do to help them.

   Discuss their experiences in small groups and then as one large group.



TRUE OR FALSE OR A LITTLE OF BOTH??

1. Some people who experience depression can work in very important positions.

t f both

2. When you apply for a new job, you should be honest with your employer from the very beginning about your health if you have a history of emotional problems.

t f both

3. To someone who does not feel safe with strangers, travelling on a city bus without a friend could be very frightening.

t f both

4. Getting involved in a sport can help someone who is depressed.

t f both

5. Children with emotional problems should be encouraged to play with children without this disability.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. true

   Some people can continue to work in important positions. They may for a period of time need to be relieved of some of the more stressful aspects of their job or to take off a little time from work. Other people cannot handle the pressures of a top-level position because of their emotional problems.

2. both

   The response to this statement can be argued from both sides. Because employers' attitudes are often very negative, it may be best not to make any mention of it and to begin a new job with a clean slate. However, if you are aware of certain accomodations which you would require in order to take the job, it might be advisable to mention it without downplaying your qualifications.

3. true

   It is often the case that people with emotional problems do not trust the people around them. They believe others wish to hurt them in some way. Travelling on buses might be an activity that requires some assistance with the possibility of building their confidence.

4. true

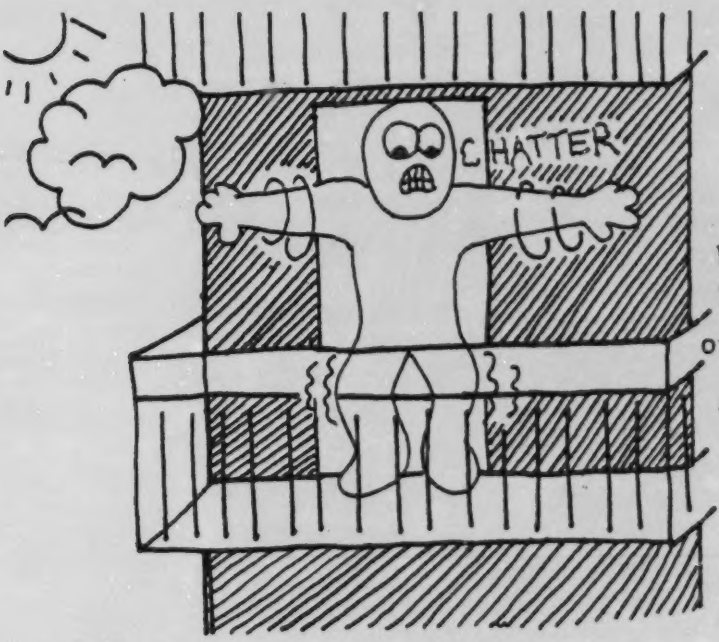
   Physical exertion is often advised for people who are depressed as a way of making them feel a little better.

5. true

   Children with and without emotional problems benefit from the contact. Those with the problems have good role models from whom to learn and do not become isolated and those without the problems will learn to be supportive and to feel more at ease and accepting in their company.

WHAT'S YOUR OPINION??

1. For someone who does not feel comfortable under pressure, what kinds of jobs might he/she be wise to avoid?

2. 

When you are on your way to or from school or when you are in school, are there things that frighten you more than you think they should?

3. People with emotional problems often find it difficult to adapt to new situations or to meet new people. Do you think it is helpful to push them to get out and face these situations? Is it wiser to allow them to back away until they decide it is time to move forward?

ACTIVITIES

1. To become aware of the importance of being able to trust one another,

   For young children

   Ask participants to divide into pairs and give a blindfold to one person in each pair.

   The blindfolded person and the "guide" each take hold of a short rope. The leader guides his/her partner through a course, giving warnings of steps, walls, etc. Switch roles.

   For older children

   Ask participants to stand and form a tight circle facing inwards with one person in the centre (6 - 10 persons per circle).

   The centre person, standing straight with feet together on the floor, allows him/herself to fall forward and backward into the arms of the circle participants.

   The people around the circle are entrusted to simply push the person on the back (or on the shoulders in front) toward the centre.

   Rotate different persons into the centre position.

   After the exercises, discuss with the participants their feelings as both the "trusted" and the "entrusted".

(cont'd)

ACTIVITIES (cont'd.)

2. To become sensitive to situations which may cause stress and tension,

   Ask for 3 volunteers to role play each of the following situations:

   a. mother and child arguing over child's need to wear boots on a wet but mild spring day; father tries to settle the argument

   b. two students disagreeing over who came in first in 100 metre race; teacher tries to settle the argument

   c. a new waitress is under pressure from a dissatisfied customer and her boss

Who has created the tension in these situations? Who is in the best position to relieve the tension? Could the stress have been avoided? How often are you in stressful situations? How do <u>you</u> deal with them?

TRUE OR FALSE OR A LITTLE OF BOTH??

1. People who experience emotional problems are so sensitive that you should never criticize them.

t f both

2. A person who is very withdrawn (doesn't like to talk or do things with other people) can sense warmth and affection shown towards them by others.

t f both

3. There is no chance of helping someone who feels very sad almost all of the time.

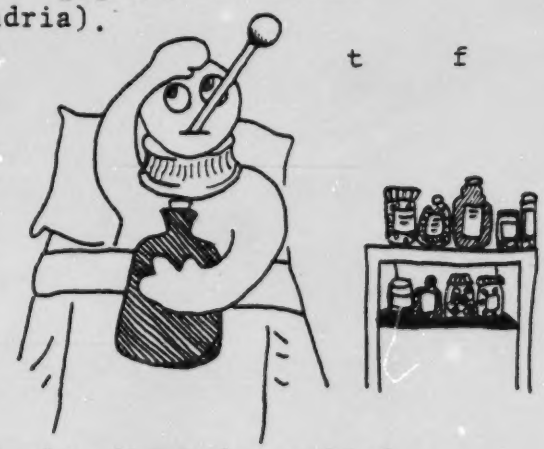
t f both

4. If someone who has a mild form of mental illness lacks the confidence needed to make even little decisions, you are not helping them if you make their decisions for them.

t f both

5. It is OK to suggest to a friend or relative that they should try to get help from a counsellor if they have symptoms of mental illness (e.g. hypochondria).

t f both



6. Mentally ill persons don't mind being called "crazy", "insane", "mental cases", or "loonies".

t f both

RESPONSES TO THE TRUE FALSE DILEMMAS

1. both

   For the most part, this is not true. People can be given constructive criticism in a tactful manner. This helps them to know if their actions are appropriate and does not make them feel they are being overprotected. There are some people who experience emotional problems to such a degree that they could not cope with criticism.

2. both

   This is true for most persons. They may or may not be receptive to such approaches but they are usually aware of how they are being treated by others. They have the right and the need to be respected and to be cared for by the people around them. There are some people whose withdrawn state indicates they do not have an awareness of how others are acting toward them but relatively, this is a very small percentage.

3. false

   There is a chance of being able to help the person by
   a) being caring and supportive toward them
   b) suitable medication
   c) professional counselling
   d) hospitalization (away from responsibilities and in an environment where medical staff can experiment with types and quantities of medication)
   e) electro-shock therapy

4. true

   When other people make your decisions for you, you lose control of your own life. You also lose the opportunity to learn from the consequences of your own decisions. You can help someone by offering them choices but the decisions are best made by the person concerned.

5. true

   This can be done sensitively and ought not to be said as a command. There is nothing wrong with consulting someone else for advice and support. Often, the person being counselled will do most of the talking and, with the added insights of the counsellor, will arrive at the alternative solutions.

.....2

RESPONSES (cont'd.)

6. false

People have feelings and being ridiculed by others can hurt their feelings.

No matter what a person's disability may be, they are <u>people first</u> who happen to have a disability of some kind.

WHAT'S YOUR OPINION??

1. Do you think it is a sign of weakness or a sign of strength to admit you need help? How do you decide when it is the right time to ask for help for your problems?

2. "Self-help" groups give people with similar problems a chance to share their feelings and to receive advice. They are usually led by an experienced group leader.

   Do you have certain people with whom you like to share your problems?

   Why do you think a person might like a self-help group more than talking with just one person?

64

ACTIVITIES

1. To develop a better understanding of how to help a person who is feeling depressed,

   Ask students to prepare questions having to do with how to effectively approach someone whose mood is very low.

   Invite a guest to meet with the class who has experienced depression to discuss the ways in which people are both helpful and not helpful towards them.

   Ask students to draw pictures of themselves in a previous situation of helping a family member or friend

   a. who felt very sad at the time

   b. who felt very nervous at the time

2. To become more sensitive to the effects of name-calling,

   Ask students to list the names which are used to tease one another. Discuss the names and their actual meanings.

   Ask students to cite the most common situations where their peers engage in name-calling.

   What are the results?

   Ask students to record or to tell the group a a name which they are sometimes given but which they do not like.

   Discuss why the name bothers them.

   Ask the group to come up with names for one another which are positive rather than negative.

BACKGROUND INFORMATION

ON

MENTAL ILLNESSES

Mental Illnesses

- are caused by environmental and/or chemical factors
- are sometimes hereditary
- can begin at any age in life
- vary from mild to severe
- are often a person's response to stress in the environment
- can involve aggressive, self-destructive or defiant behaviour
- can involve depression, withdrawal, anxiety and extreme fears
- may involve schizophrenia, autism or psychoses
- are treated by drugs, by therapy counselling and sometimes by electro-shock therapy
- can be cured in some cases

A GLOSSARY OF

TERMS AND ISSUES

- WHAT WE MEAN BY WHAT WE SAY -

Anxiety

- FEELING of fear, an apprehension and arousal unpleasant for the person experiencing it
- BEHAVIOUR of someone who is anxious may include overeating, fidgeting, arriving hours early, quick temper, easily brought to tears
- RELIEVED by relaxation techniques and/or by medication a

Attitudes

- PUBLIC has difficulty relating to people with mental illnesses particularly because feelings cannot be seen and concrete solutions may not exist
- PUBLIC often reacts with superstitious fear
- HAVE improved since the early 20th Century and are still changing
- PEOPLE need to be approached with respect for dignity and self-determination

Depression

- MOST common mental illness
- MAY be caused by changes in environment or by chemical imbalance
- TREATED by medication and/or psychotherapy
- SYMPTOMS are insomnia, loss of appetite, withdrawal and apathy, loss of self-confidence, excessive procrastination, letting things be done for you

Paranoia

- RARE psychosis (psychoses: loss of contact with reality because thought and emotions are so disordered)
- DELUSIONS of persecution and grandeur
- EXCESSIVE suspiciousness and distrustfulness of others
- TREATED by medications and/or psychotherapy

GLOSSARY (cont'd.)

Treatment

- ADVANCES in research every year
- MEDICATION and/or counselling can, in many cases, help a person back to complete recovery with no reoccurence in later life
- ELECTRO-SHOCK therapy has been used to help pull a person out of depression (non-painful electrical shock given to the brain, does not affect intelligence, may produce temporary memory loss)
- HOSPITALIZATION for short and long-term care allows for the possibility of altering medication levels, removing person from stressful situations for temporary period and supervision

RESOURCES

Organizations

Canadian Mental Health Association,
2160 Yonge Street, 3rd Floor,
Toronto, Ontario. M4S 2Z3 (416) 484-7750

Mental Health Ontario,
8 Pailton Cresc.,
Toronto, Ontario. M4S 2H8 (416) 487-5361

Ontario Association of Children's Mental Health Centres,
40 St. Clair Ave. E, Suite 309,
Toronto, Ontario. M4T 1M9 (416) 921-2109

Films

(Elementary)
Bloomin' Human: Get Used to Me
16 minutes (National Film Board)
Kay is very sensitive and laughed at for liking her father's garbage collecting job. She is excluded from class games and goes through the conflict of changing for others vs asserting herself.

(Secondary)
Learning to Be Human: The Skating Rink
27 minutes (National Film Board)
A teenage boy who is shy and lacking in self-confidence and who has a stammer has difficulty relating to family and friends. He discovers a talent for ice skating which becomes an avenue for forming relationships and feeling fulfilled.

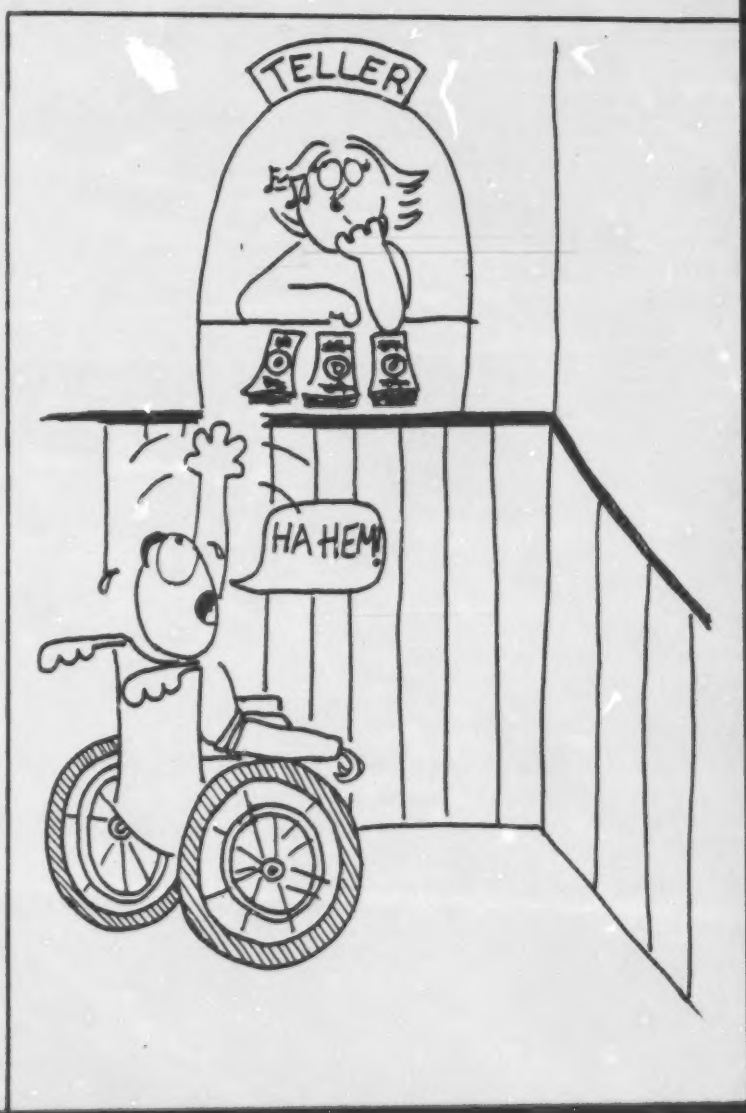
Books

(Elementary)
Non-Medical Use of Drugs, Ministry of Health and Welfare, The Hole in the Fence, (available from Ministry of Supply and Services, Hull, Quebec), Catalogue #449-31976
A colourful book for young children bringing out the ways of resisting peer pressure.

(Secondary)
Green, Hannah, I never promised you a Rose Garden,
An intense account of a teenage girl's struggle with emotional problems and her gradual return to mental health.

Introducing...

People With Physical Disabilities



THERE IS A WIDE RANGE OF PHYSICAL DISABILITIES. IN THIS GUIDE WE ARE DISCUSSING PRIMARILY THOSE PHYSICAL DISABILITIES WHICH AFFECT THE MOBILITY OF INDIVIDUALS.

TRUE OR FALSE OR A LITTLE OF BOTH??

1. People who use wheelchairs could walk if they really wanted to do so.

t f both

2. People with spastic movements (with cerebral palsy, for example) do not experience pain as a result of the spasms.

t f both

3. Most physical disabilities are not contagious; you won't catch the disability from a friend.

t f both

4. Someone with spastic movements is probably not mentally retarded.

t f both

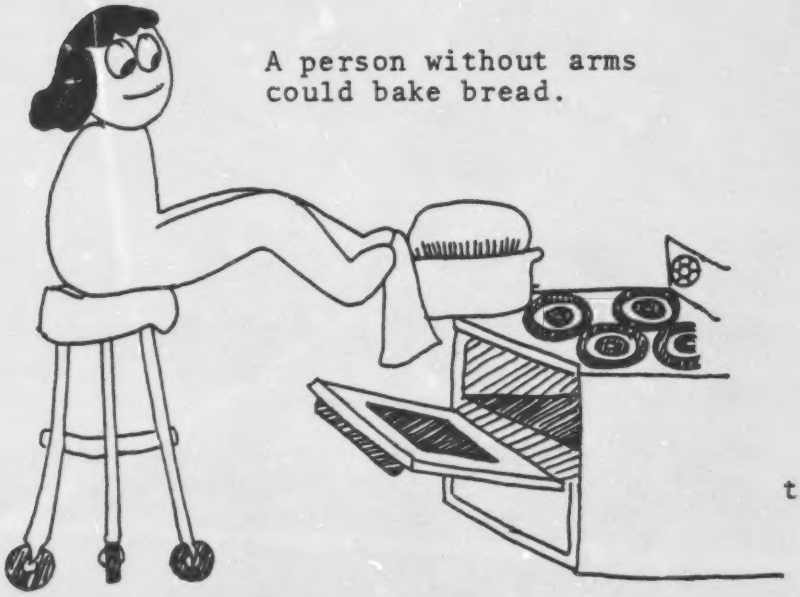
5. People who are in wheelchairs or people who need crutches or braces to move around feel sad most of the time.

t f both

6. A person unable to get in or out of their wheelchair alone because of their disability could live alone in an apartment.

t f both

7. A person without arms could bake bread.



t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. both

   Some people can walk but with great difficulty and perhaps with some discomfort. The wheelchair can save them alot of energy and enable them to travel far greater distances.

2. true

   Spasticity, trembling, and other symptoms of various disabilities or the medications taken are often a nuisance but usually do not cause physical pain.

3. true

   Very few physical disabilities can be passed from one person to another by coming into contact. Some are inherited and some are caused before, during or just after birth; others are the result of illness. Some are caused by accidents.

4. true

   Only a small percentage of people with cerebral palsy or other disabilities which cause uncontrolled movements are mentally retarded. Though their movements and speech may be slow, their mind is unaffected. The misunderstanding of this fact by others is clearly very frustrating.

5. false

   Some people are sad alot of the time. Many people however, adjust to their disabilities and feel sad and happy at times just like anyone else.

6. true

   This person would probably require someone to come into their apartment in the morning and at night to provide some assistance (a friend, relative or paid employee), but it is possible to live alone.

7. both

   Some people could adapt by using their feet while seated on a raised stool. (see the film "A Day in the Life of Bonnie Consolo", page 87).

WHAT'S YOUR OPINION??

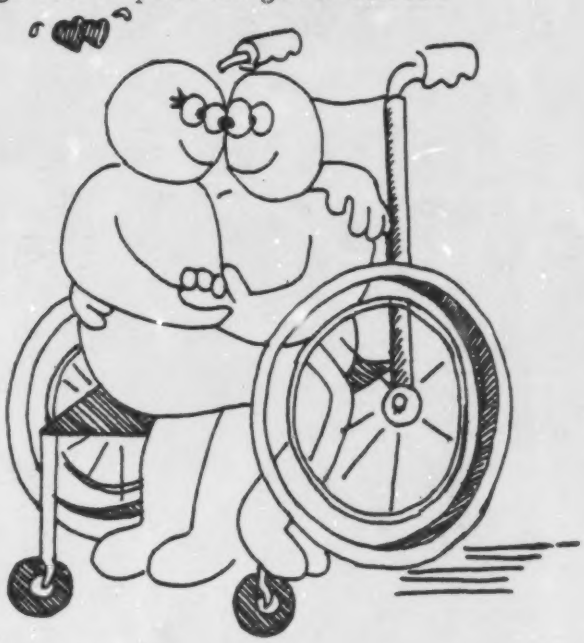
1. There are many different kinds of physical disabilities and many different causes.

   Do you know the causes of cerebral palsy?

   Can a person with cerebral palsy be cured?

   Does the disability change as a person gets older?

2. Can a person who is paralyzed from the waist down enjoy being hugged or giving a hug to someone else?



   Can a woman who is paralyzed from the waist down bare children?

3. How would a person without arms . . . . .

   put on a dress with a zipper up the back?

   write a letter?

   pick up fruits and vegetables in the supermarket?

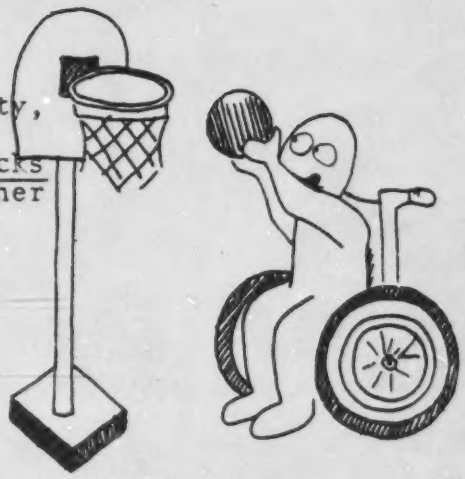
4. What kinds of technical aids could be useful to a person with frequent muscle spasms in . . .

   tying a shoelace?

   doing up a button?

   eating?

ACTIVITIES



1. To simulate limitations in physical mobility,

   Have participants place a thick pair of socks on their hands or tape their fingers together with masking tape and ask them to try:

   a) tying a shoelace
   b) buttoning a coat
   c) turning the pages of a book
   d) writing their name and address
   e) spreading butter on a slice of bread and cutting it into small pieces
   f) playing a game of basketball

   Have participants place one hand behind their backs and attempt tying a shoelace, writing their name with the hand not normally used for writing, and spreading butter on a slice of bread.

   Have participants place a pen or pencil in their mouths and complete the "Mouth-Writing Activity Sheet" on the next page.

   What difficulties did you experience in the above tasks because of the physical limitations?

   How did you get around the limitations?

   Did you want help in achieving the tasks?

2. To become familiar with technical aids used in the home as part of everday living,

   Ask students to list the aids which are used in the different rooms of their homes (kitchen, bathroom, bedroom, etc.)

   Which devices would be used by someone unable to walk when they are at home?

   Divide participants into small groups and ask for each group to invent one device for use at home. If art supplies are available, a model of the device could be made. Ask them to describe its purpose and who could use it.

   Try a number of simple tasks without the use of aids usually available (e.g. writing on unlined paper, working in the dark).

MOUTH-WRITING ACTIVITY SHEET

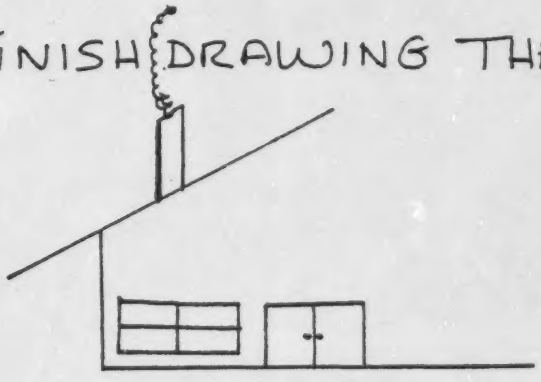
1. PUT AN "X" IN THE SQUARE

2. FILL IN THE MISSING LETTERS

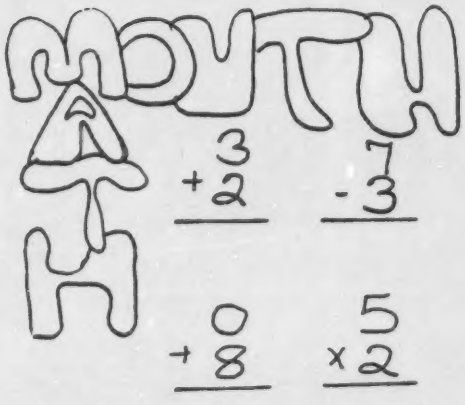
AB_DEFG_IJ_

lm_op_rst

3. FINISH DRAWING THE HOUSE



4.



name _____

date _____

TRUE OR FALSE OR A LITTLE OF BOTH??

1.

Never ask a person in a wheelchair to go sailing.

t f both

2. A person without legs can drive a car.

t f both

3. Any job is better than no job. A person with a physical disability should accept any kind of job even if the job doesn't interest them.

t f both

4. All physically disabled children have the best learning experience in a special school.

t f both

5. The problem of stairs for someone in a wheelchair is <u>less</u> important than the problems of not being accepted by others.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. false

   Sailing is a sport which some people with physical disabilities can enjoy. It might only be a matter of using different parts of their body to perform the tasks on the sailboat.

2. true

   Cars can be adapted for people without legs. All of the controls (acceleration and braking) would be at the hand-level.

3. both

   Ideally, everyone should work in a job which interests them. Disabled persons should have equal opportunity in being considered for a job for which they qualify. Sometimes it is necessary for anyone to do an undesirable job in order to earn money and/or to gain experience in the work-world.

4. false

   Some children with physical disabilities study in special schools. Others study in the regular classroom or in a special class within the regular school for part or all of the day. The teacher in the regular classroom will sometimes require an assistant if some of the students have a lot of special needs.

5. both

   Attitudes play a major role in all areas for a person with disabilities. The attitudes of both disabled persons <u>and</u> of others toward them are equally important. Stairs and other physical barriers <u>will not</u> disappear before attitudes change.

WHAT'S YOUR OPINION??

1. A woman in a wheelchair with good use of her arms and hands would like to become a doctor. She cannot walk because she had polio as a child. Which of the following might be barriers to reaching her goal?

a) access to education
b) transportation
c) access to the medical library
d) stairs
e) washrooms
f) attitudes of other doctors
g) attitudes of patients
h) winter weather

Can you add other barriers to this list? How might she get around some of these barriers?

2. Check the sports which could be played by a person in a wheelchair who is able to use the upper part of his/her body.

baseball_____	basketball_____	soccer_____
swimming_____	football _____	shotput____
skiing _____	hockey _____	racing ____ (track)

3. What kinds of jobs could a person who uses a wheelchair find in your community?

4. Could a person attend your school if they needed to move around in a wheelchair... as a student? as a teacher?

5. What would be different about having to depend upon a special van for transportation from using the regular transportation system?

6. Some people think stairs are the only physical barrier to a person who uses a wheelchair.
Can you explain how each of the following could create some problems as well?

sinks	steep ramps	high counters
taps	slippery ramps	low desks
door handles	light switches	shelves
double door vestibules	thick carpets	heavy doors
revolving doors	narrow doorways	rear oven/ stove switches

ACTIVITIES

1. To become aware of obstacles to accessibility,

   Ask participants to prepare a "checklist" for "Accessibility" (sample on next page).

   Students can check the accessibility of:

   a) their classroom
   b) the gymnasium
   c) the washrooms
   d) the entrances/exits
   e) their own homes/apartments
   f) other public facilities (e.g. shopping centres, libraries, banks, cinemas, etc.)

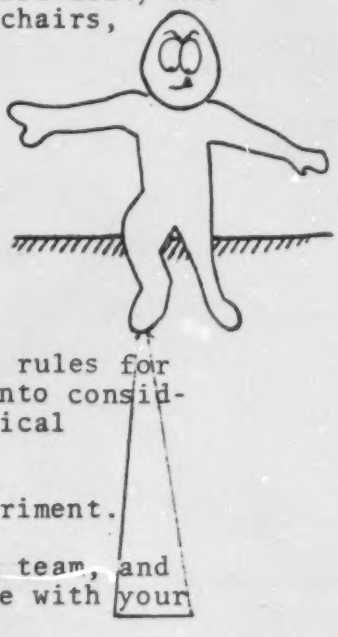
   Write letters to politicians, storeowners, bank managers, and restaurant owners urging changes in accessibility.

2. To simulate the experience of barriers to accessibility,

   Ask several students to assume a physical disability for a day (supply, if possible, crutches, wheelchairs, slings, etc.)

   Ask them to move about to experience,

   a) getting to and from school
   b) managing at lunchtime in the cafeteria
   c) functioning in the classroom



3. To become aware of the possibilities for athletic participation,

   Ask participants to create a set of adapted rules for several team and individual sports taking into consideration people with different kinds of physical disabilities.

   Students can simulate disabilities and experiment.

   Invite an athlete who has a disability or a team, and arrange for a demonstration and/or challenge with your school teams.

BARRIERS CHECKLIST

	YES	NO
Most buildings have barriers.....but barriers can be changed.	___	___
If the main entrance has stairs and no ramp, it has a barrier.	___	___
Are the doorknobs of all main doors 92 cm from the ground so that people in wheelchairs can reach them?	___	___
Do the hallways have handrails to help people walk? No handrail is a barrier for some people.	___	___
Are there parking spaces reserved for disabled people? Are they near the entrance? Are they 366 cm wide?	___	___
Are there curb cuts so that people in wheelchairs or people with baby carriages or shopping carts can pass easily?	___	___
Are there tactile markings (can be felt by touch) cut in the sidewalk to warn people who are blind?	___	___
Does the school have an elevator?	___	___
Does the elevator have light and bell signals to help people who are blind or deaf to know when the elevator is ready?	___	___
Are doorways to the bathroom 84 cm wide?	___	___
Are the sinks low enough? Get a chair and check.	___	___
Are the telephones in the building accessible? Get a chair and check.	___	___
Are fire alarms low enough for people in wheelchairs?	___	___
Are there grab bars in the bathroom stalls so that people can lift themselves from a wheelchair to a toilet and back again?	___	___
Are the windows 61 cm - 71 cm from the floor so that short people and people in wheelchairs can see out?	___	___
Are the aisles in the classroom at least 81 cm wide so that people in wheelchairs or on crutches, or with canes or walkers, can get around easily?	___	___

(cont'd)

Barriers Checklist (cont'd.) YES NO

Are there flashing lights for fire alarms so that deaf students will know there is a fire? ___ ___

Count number of yes answers. Divide by total.

Count number of no answers. Divide by total.

Calculate whether or not your building is accessible.

81

TRUE OR FALSE OR A LITTLE OF BOTH??

1. One should avoid expressions like "Let's take a walk" when talking with someone in a wheelchair.

t f both

2. People with spastic movements (with cerebral palsy, for example) don't mind if you stare at them; they are used to it.

t f both

3. Most disabled persons don't mind if you ask them personal questions like "How did you become disabled?"

t f both

4. You should never get angry with a disabled person. They already have enough problems.

t f both

5. If you do not understand what is being said by a person with a speech problem, ask them to repeat themselves until you do understand.

t f both

6. When you see a person sitting in a wheelchair along the sidewalk you can be sure that your help is needed, and you should give them a push.

t f both

7. At a concert, it is best to seat a group of physically disabled persons all together.

t f both

8. You should treat people who are in wheelchairs nicer than you would someone with no obvious disability.

t f both

9. We should not feel sorry for people in wheelchairs.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. false

   One should not speak any differently toward a person in a wheelchair than toward a person who is not. People are looking to be accepted and not to be singled out.

2. false

   Everyone has feelings and everyone's feelings can be hurt.

3. true

   Most people would rather you asked questions than stare at them, or form misconceptions.

4. false

   If a person has done something which has made you angry, you should show your feelings whether they have a physical disability or not. This is another way of helping people to feel accepted and not over-protected.

5. true

   It is better to ask for a repeat of what was said than to pretend to have understood.

6. false

   People like to be as independent as possible. ASK if your help is needed and if so, HOW to be most helpful. No one knows their needs better than the person needing help.

7. false

   People with disabilities should have the choice to sit with whomever they wish. Ideally, there should be space for wheelchairs at the ends of the aisles.

8. false

   You do not need to be nicer to people with disabilities but you should try to understand their needs and to show them the same respect you would to anyone else.

9. true

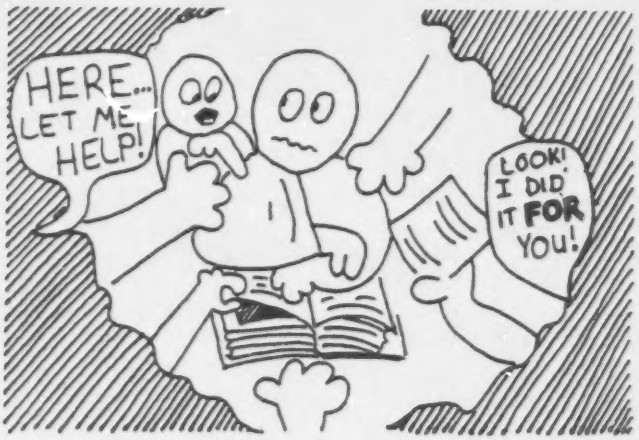
   Understanding goes alot further than pity.

WHAT'S YOUR OPINION??

1. Why do some people try to hide their disabilities?

2. Did you ever break an arm or a leg? Did people ever try to help you more than you needed? Was it easy to ask for help when you needed it?

3. Do you think it is better to offer help to a disabled person or to wait until they ask for help?



4. Why do you think some people would not want to use a wheelchair even though it would make moving around much easier?

5. Have you ever felt sorry for yourself? When?
How do others treat you when they feel sorry for you?
Do you think it helps the situation?

6. Why would a person using a wheelchair not like to be called a "wheelchair victim"?

7. Who makes decisions for you?
How do you react when others tell you what to do?
Do people with physical disabilities have others making decisions for them?
Should this be changed?

ACTIVITIES

1. To become more familiar with attitudes toward people with physical disabilities,

   Ask students to make a collage with magazine photographs and with drawings of their own which show people coming into contact with physically-disabled persons.

   Watch films and read books and articles about people with physical disabilities.

   Are the relationships always "helping" ones or are balanced friendships developing?

2. To experience the barriers which arise because of attitudes,

   Ask for 3 volunteers to role play.

   A man in a wheelchair enters a shoe store to buy himself a new pair of boots. He has a friend with him who is pushing the wheelchair.

   The salesperson asks the friend if help is needed in choosing the boots. Once it is clear which of the two persons is actually buying the boots, the salesperson continues to address the friend of the man in the wheelchair with questions like "What size does he wear?" and "What colour would he prefer?"

   What changes should take place in this situation?

   Who should be the one to correct the salesperson's error?

   In what other situations can you imagine this takes place?

   Has this ever happened to you as a child entering a store with an adult?

BACKGROUND INFORMATION

ON

PHYSICAL DISABILITIES

The following are a few points about some of the more common physical disabilities:

Cerebral Palsy

- is a set of brain disorders and is not a progressive disease
- can vary from mild to very severe
- begins just before, during or shortly after birth
- affects speech, motor coordination and strength
- often causes spastic movements or rigidity
- implies messages from one part of the brain are not coming through properly to the muscles
- is not a sign of low intelligence or mental illness
- cannot be cured

Muscular Dystrophy

- is a progressive, hereditary condition
- usually affects boys from 4-6 years of age
- muscle fibres are being replaced by fatty tissue
- causes wasting of muscles and increasing weakness
- is implicated where there is frequent falling, a waddling gait and problems in standing up and climbing stairs
- gives a child a lifespan into his/her late teens or early adulthood in most cases
- has no cure as yet

Multiple Sclerosis

- is a progressive neurological disease with an unknown cause
- begins, usually, between 25 and 35 years of age
- often causes fatigue, impaired muscular action, feeling of heaviness in limbs, slurring of speech and visual impairment
- occurs when there is a loss of myelin, the fatty sheath surrounding the nerve fibres in the spine

(cont'd)

BACKGROUND INFORMATION (cont'd.)

- varies from mild to severe
- advances at different rates, often with long plateaux and even significant improvement
- cannot be cured

Paraplegia and Quadriplegia

- usually occur as the result of a spinal cord injury in an accident
- Paraplegia - paralysis of the lowe__ half of the body, affecting both legs
- Quadriplegia - paralysis of the body from approximately the upper arms and chest down
- can improve only if the spinal cord has been injured and not broken

Polio (thousands were affected before vaccine was developed in 1950's)

- is a viral disease affecting nerve cells of spinal cord and brain stem
- causes partial or complete paralysis of the muscles
- may affect lungs and breathing system
- will recur in future generations in the West if people stop administering vaccine
- cannot be cured

Spina Bifida

- is a congenital defect in the development of the spine
- implies a cleft or opening in the bony spine
- varies in severity depending upon size of opening and whether the spinal cord and its coverings are exposed or protrude through the opening
- causes muscle weakness, loss of sensation of touch, pain and paralysis from protrusion downward
- saclike bulge usually appears in lower back area
- causes lack of bladder and bowel control
- may cause "hydrocephalus" where spinal fluid does not circulate and is not absorbed causing an enlarged head from which fluid must be drained

A GLOSSARY OF

TERMS AND ISSUES

- WHAT WE MEAN BY WHAT WE SAY -

Accessibility

- A FACILITY IS ACCESSIBLE WHEN people with various kinds of disabilities are able to enter and to move freely inside
- THIS CAN INCLUDE having ramps, wide doorways, wall switches within reach, easy-to-open doors, non-slip surfaces and washrooms with low mirrors, grab bars by the toilets and ample space for a wheelchair
- A PROGRAM IS ACCESSIBLE WHEN it is adapted to suit the needs of potential participants

Athletics

- PEOPLE with physical disabilities participate in a variety of individual and team sports
- THESE INCLUDE basketball, volleyball, track and field, archery, shotput, swimming and skiing

Attitudes

- ATTITUDES OF PEOPLE WITH PHYSICAL DISABILITIES and the ATTITUDES OF OTHERS towards them are both crucial
- DISABLED PERSONS accept their disabilities to varying degrees and accept their need for help in different ways
- ACCEPTANCE by others influences their feelings of comfort to be open about their needs
- CONSULTATION with disabled persons concerning decisions which will affect them should take place as much as possible

Barriers

- ENVIRONMENTAL (physical accessibility, climate)
  or
- ATTITUDINAL (lack of knowledge and lack of experience with people with disabilities leads to misconceptions and insensitivities)

Employment

- PERSONS with physical disabilities can do work in many different kinds of manual and academic positions
- A LACK OF job-readiness due to limited educational opportunities and limited work experience may be barriers to finding a job.

 (cont'd)

GLOSSARY (cont'd.)

- PHYSICAL INACCESSIBILITY and an unwillingness of employers to make accommodations may be another barrier
- THE ATTITUDES OF EMPLOYERS may be a barrier to finding a job because it is often expected that the person will be absent from work too often or will not be able to fulfill his/her responsibilities adequately; studies have proven the contrary

Housing

- PEOPLE with physical disabilities live in a variety of housing arrangements
- A SMALL PERCENTAGE live in institutions due to the severity of the disability or to the absence of relatives or lack of space in community settings
- GROUP HOMES are set up for 3 - 6 adults to share the responsibilities of housekeeping with or without live-in aides
- HOME SUPPORT SERVICES enable persons to remain in their private home or apartment and to receive needed assistance with such tasks as grooming, bathing and preparation of food
- INDEPENDENT LIVING is a term used to describe the type of living arrangement made possible by the above-mentioned Home Support Services and by Technical Aids

Sexuality

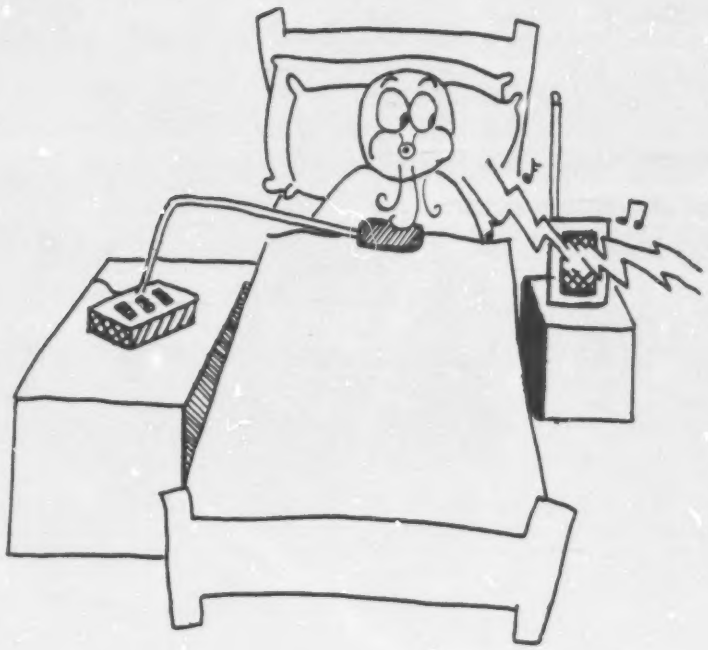
- SEXUALITY is important for men and women with physical disabilities
- SEXUAL EXPRESSION toward and by someone who is physically disabled is an individual experience and even persons with partial paralysis have only to discover their areas of sensitivity
- WOMEN paralyzed below the waist can become pregnant and successfully bare a healthy child
- MEN who are paralyzed below the waist are usually more handicapped than women in their sexual functioning
- DEPENDING upon the level of spinal cord injury, some men are able to have an erection and ejaculation and thus may be able to father a child through intercourse
- SEXUAL EDUCATION should not be bypassed for physically disabled children

(cont'd)

GLOSSARY (cont'd.)

Technical Aids

Tasks (for those with impaired motor coordination)	Aids
Buttoning a shirt or coat	- a metal loop pulls button through hole
Eating	- a spoon is easier than a fork - plates with raised edges make it easier to control food - straw for drinking
Turning on and off lights, radio or TV or dialing a telephone number	- an environmental aid, such as a TOSC unit - person blows or leans on a switch to activate system and selects item to be turned on or off - person can also have system dial a telephone number



Communication - a Blissymbol board has a series of squares with symbols and words to which a person points to convey a message

Mobility/Handling articles - prosthetic (artificial) legs and arms can be fitted for many people to enable them to walk/to use their arms and hands for daily tasks

- wheelchairs are mobility aids

(cont'd)

GLOSSARY (cont'd.)

Transportation

- A PARALLEL TRANSPORTATION SYSTEM has been established in many communities and services people who cannot use the regular system of buses/subway because of their disability
- VANS with hydraulic lifts for wheelchairs take people to and from their homes, to work and to medical appointments and possibly to visit friends and to recreational activities, depending upon the demand
- PEOPLE must book a ride in advance, anywhere from 24 hours to one week ahead and may or may not be given a ride, depending upon the demand

RESOURCES

Organizations

Canadian Cleft Lip and Palate Association
170 Elizabeth St., Suite 649
Toronto, Ontario, M5G 1E8 (416) 598-2311/225-0491

Canadian Cystic Fibrosis Foundation
161 Eglinton Ave. East, Suite 503
Toronto, Ontario, M4P 1J5 (416) 485-9149

Canadian Paraplegic Association
520 Sutherland Dr.
Toronto, Ontario, M4G 3V9 (416) 422-5640

Canadian Rehabilitation Council for the Disabled
One Yonge St., Suite 2110
Toronto, Ontario, M5E 1E5 (416) 862-0340

The Easter Seal Society
350 Rumsey Rd.
Toronto, Ontario, M4G 1R8 (416) 425-6220

Multiple Sclerosis Society of Canada
130 Bloor St. West, Suite 700
Toronto, Ontario, M5R 1C5 (416) 922-6065

Muscular Dystrophy Association
74 Victoria St., Suite 1014
Toronto, Ontario, M5C 2A5 (416) 364-9079

Ontario Federation for the Cerebral Palsied
2010 Yonge St., Suite 300
Toronto, Ontario, M4S 1Z9 (416) 553-5952

Ontario Federation for the Physically Handicapped
90 Thorncliffe Park Dr.
Toronto, Ontario, M4H 1M5 (416) 425-0501

Ontario March of Dimes (serving adults with physical disabilities)
90 Thorncliffe Park Dr.
Toronto, Ontario, M4H 1M5 (416) 425-0501

Parkinson Foundation of Canada
55 Bloor St. West, Suite 232
Toronto, Ontario, M4W 1A6

SIECCAN - The Sex Information and Education Council of Canada
14 Clarendon Ave.
Toronto, Ontario, M4V 1H9 (416) 483-8805

Spina Bifida and Hydrocephalus Association
10 Trinity Square
Toronto, Ontario, M4G 1B1 (416) 979-1549

Many of these organizations have offices throughout Ontario. Consult your telephone directory.

(cont'd)

RESOURCES (cont'd.)

Films

(All age levels)
A Day in the Life of Bonnie Consolo
16 minutes

An easy-going mother or two children talks about her life as someone born without arms and is filmed in a variety of situations to which she adapts on a day-to-day basis.

(Secondary)
Happiness is Loving Your Teacher
28 minutes

Hostile class of teenagers pitted against a teacher who is in a wheelchair.

(Elementary/Secondary)
I'll Find a Way
26 minutes

Nadia, who has spina bifida, takes people through her day to day activities and highlights non-pitying attitudes of those around her. Winner of Oscar 1978 - Best Documentary Short.

(Elementary/Secondary)
The Truly Exceptional Carol Johnston
16 minutes

Though Carol has one arm which is a stump just below the shoulder, she is an accomplished gymnast. Her determination and ability to adapt to her disability are sensitively portrayed.

Books

(Elementary)
Cocking, Althea, The Blissymbol Opposite Series, Centennial College Press: Scarborough, 1979.

Introduces symbols of top/bottom and big/little with illustrations of a fish in a tank. Phrases in print and in Blissymbols.

(Elementary)
Mertens, Winnie, My Feet Roll, Before We Are Six: Hawkesville, Ontario.

Follows a child in a wheelchair by illustrations only into a variety of activities and social situations with friends and family.

(Secondary)
The National Easter Seal Society, Self-Help Clothing For Children who have Physical Disabilities, U.S.A.

Sketches and explanations of a wide variety of clothing with various adaptations to suit different disabilities.

(cont'd)

RESOURCES (cont'd.)

(Elementary with Adult Guidance)
Stein, Sarah Bonnett, About Handicaps, An Open Family Book, Walker & Co.: New York, 1974.

Story about Joe who has cerebral palsy and becomes an accomplished rider of horses with photographs and adult-level back-up material on each page.

Introducing...

People With Developmental Handicaps

IN THIS GUIDE, THE TERM "DEVELOPMENTAL HANDICAP" IS BEING USED RATHER THAN "MENTAL RETARDATION". THE DISCUSSION CONCERNS PEOPLE WHO ARE SLOW TO LEARN IN MANY AREAS OF LIFE.

TRUE OR FALSE OR A LITTLE OF BOTH??

1. Mothers who smoke cigarettes while pregnant may cause their baby to be born with a developmental handicap.

t f both

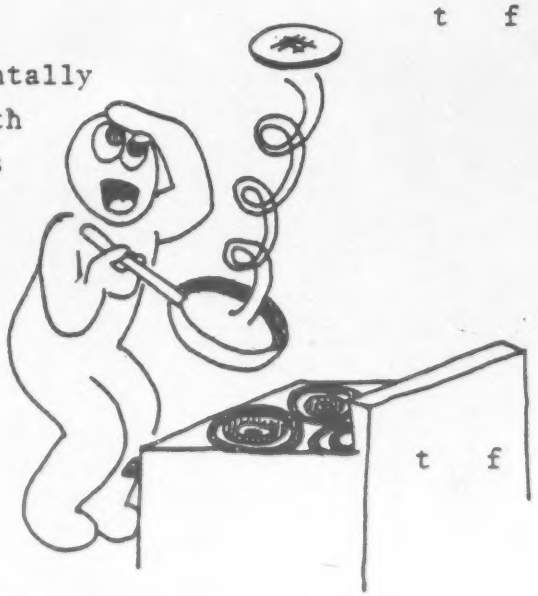
2. Children who have very little contact with other children in the first few years of their lives may be slow learners as they grow up.

t f both

3. If a parent is developmentally handicapped his/her children will also have this disability.

t f both

4. People who are developmentally handicapped must live with their mothers and fathers all their lives to be properly cared for.



t f both

5. Developmentally handicapped persons are not sick.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. true

   Tobacco from cigarettes does stunt growth. This means the pregnant woman could cause her baby's weight to be lower which increases the risk of damage to the baby's brain. Drugs and alcohol can have the same consequences.

2. true

   Without adequate stimulation in a child's early years, serious problems may arise as the child continues to develop.

3. both

   The majority of the causes are not genetic though there is some possibility of passing this disability on through one's genes.

   A problem may or may not arise in terms of the parent's ability to provide a stimulating environment for their children.

4. both

   Some people need the protection offered by their parents or by an institution. Many are able to function well in a group home or on their own with some supervision from community services.

5. true

   It is not an illness and it is not contagious.

WHAT'S YOUR OPINION??

1. What is meant by "stimulation"? What are the different ways you would try to stimulate a baby in the first few months of life?

2. A group of 6 adults is about to move into a house next door to your house. They are all developmentally handicapped and they will have a counsellor living with them to offer help where needed.

   a) How do you feel about this group moving in?

   b) Do you think your neighbours will feel the same way?

   c) How do you think you can make them feel at ease in your neighbourhood?

3. In what ways are developmentally handicapped students the same as students who do not have this disability?

   Consider - feelings
   interests
   activities
   friendships

ACTIVITIES

1. To appreciate some of the physical problems encountered from day to day by a person with a developmental handicap,

   - Poor manipulation with fingers -
   Ask students to place heavy socks over their hands and attempt to:
   a) identify objects in brown paper bag
   b) write a story or draw a picture
   c) get dressed/undressed at home

   - Weak eye muscles -
   Ask students to divide into pairs and give one member of each pair masking tape to put surgical gauze over their eyes and attempt to:
   a) read from a book
   b) watch a film or television program
   c) pour water into a container with a small opening
   Second person is a helper and also a person with whom to compare abilities given impairment.
   Reverse roles.

   - Difficulty in gross motor coordination -
   Ask for 3 volunteers to tie a rope of about 45 cm in length to each ankle.
   The students are asked to walk along the corridor with feet apart, keeping the rope taut.
   How did it feel to be walking this way?
   How do you respond when you meet someone who walks very differently from you?

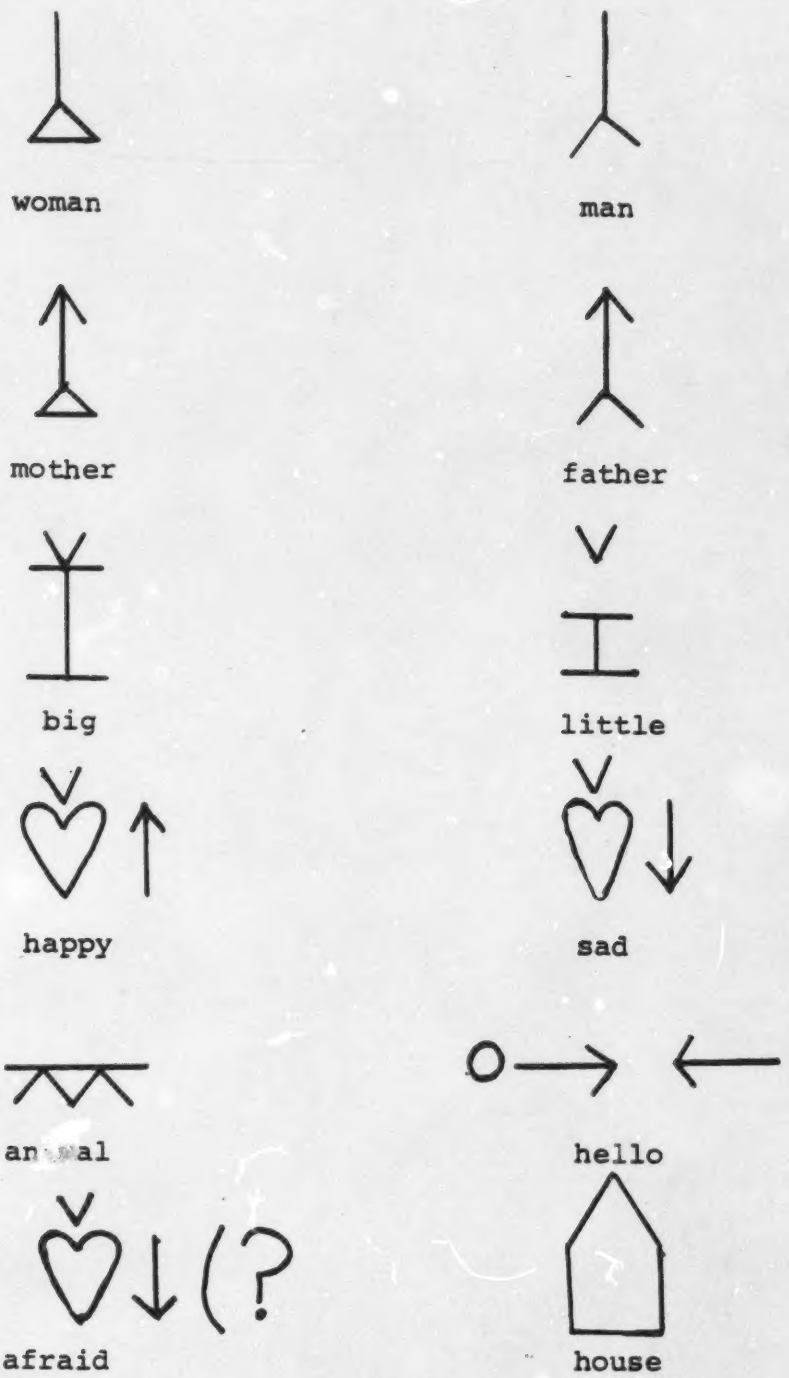
2. To appreciate the learning difficulties for someone with a developmental handicap,

   Ask students to write a sentence using only 2 syllable words.
   How would it be if you had to work this hard all the time at whatever you were doing?

   Distribute to each student a page of Blissymbols with their meanings written under each symbol (see sample attached) for one minute.
   Remove this sheet and give them a second sheet with symbols but without their meanings.

   Ask students to record from memory the meanings.
   Would it help if you had had more time to study the first sheet?
   Would clues help you to remember the missing words?
   How would this handicap affect you at home?

BLISSYMBOLICS

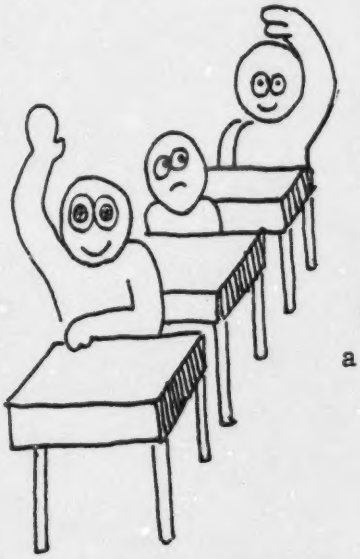


N.B. The Blissymbolic System was created for people without the ability to communicate verbally (e.g. Cerebral Palsy). These people are not developmentally handicapped.

TRUE OR FALSE OR A LITTLE OF BOTH??

1. Most persons with developmental handicaps can travel on buses by themselves without getting lost.

t f both

2. 

All slow learning students can benefit from being in a regular school.

t f both

3. A "sheltered workshop" is the best work setting for anyone who cannot work or learn fast enough in a regular workplace.

t f both

4. Someone with a developmental handicap can do a useful job.

t f both

5. If a person with a developmental handicap accidently breaks the machine with which he/she is working in a factory, the other workers should hold the person responsible for the mishap.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. true

   Many people can learn over time how to travel independently with some assistance.

2. false

   For many students, this would be an appropriate placement if extra help could be made available when needed. The student who learns slowly can benefit from the stimulating environment and social interaction. The other students can learn to be supportive and can begin to feel more comfortable.

   For some students, because of the severity of their disability, a setting of this kind would not be suitable as a full-time program.

3. false

   The sheltered workshop is a work place where people receive training in a variety of manual jobs. Some can benefit from a protected setting of this sort while others are able to learn the necessary skills in the "competitive market". Still others attend the workshop for a specific period of time and then move out into a regular job.

4. true

   People with developmental handicaps often work in jobs which do not require abstract thinking or complex skills. Nevertheless, the jobs they are doing are frequently crucial to the success of the business or company.

5. true

   It helps people to mature if they are tactfully made aware of the consequences of their actions. It does not however, help to humiliate or to ridicule the person, particularly in front of other people. They could be asked to make an appropriate contribution to its reparation,if this is the general practice.

WHAT'S YOUR OPINION??

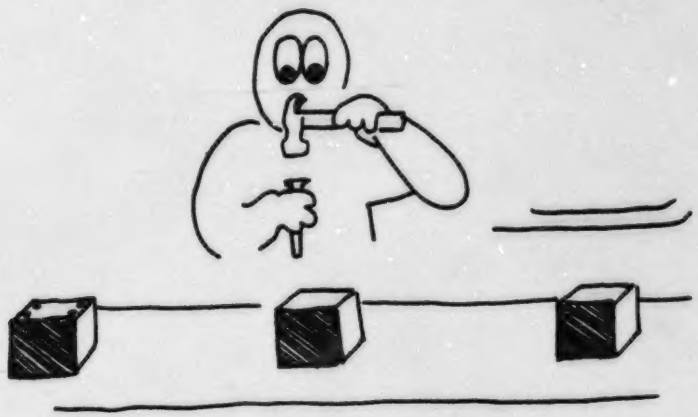
1. If your school decides a new student who is a slow learner is going to become part of your class, do you think this is a wise decision?

   In what ways does the slow learner benefit?

   In what ways do the other students benefit?

2. It has happened that people with developmental handicaps have received less than the minimum wage when they have worked in a sheltered workshop because of their slow pace of working.

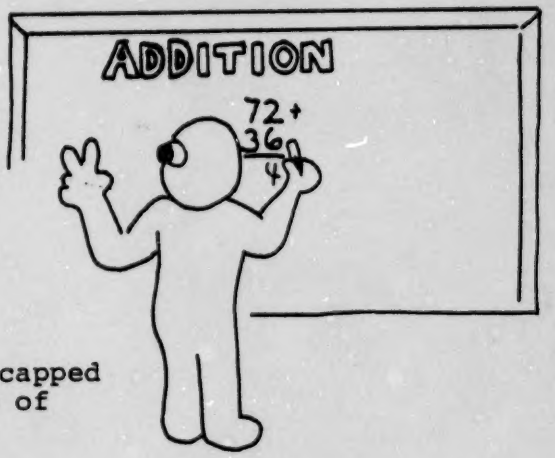
   Do you think when you are working as hard as you can but your work is very slow that you deserve the same wages as someone who is working much faster than you?



ACTIVITIES

1. To appreciate the difficulties in following instructions for someone who has a developmental handicap,

   Read a list of 12 simple instructions (see sample attached) once only.
   After you have finished, students are asked to perform the tasks given in the instructions from memory.
   How accurately can you recall the tasks in their proper order?
   Reread the list.
   How much easier is the assignment once the instructions have been repeated?
   How would this handicap make tasks difficult in
   a) moving around the city?
   b) at school?
   c) at work?



2. To understand a developmentally handicapped person's difficulties with directions of left/right and up/down,

   Ask students to write or draw by looking in the mirror reflection of a piece of paper and attempt to
   a) write their name
   b) draw a circle within a circle already on the page
   c) follow a particular route on a map with a crayon

   How do you like being treated while you are working at something difficult?
   Have you every been lost? How did it happen?
   What were your feelings at the time?

ACTIVITIES (cont'd)

1. Stand up
2. Turn around 3 times
3. Clap your hands
4. Call out your name
5. Touch your ears
6. Stamp your left foot
7. Tap the shoulder of the person beside you
8. Take 3 steps back
9. Close your eyes
10. Fold your arms
11. Sit down
12. Open your eyes

TRUE OR FALSE OR A LITTLE OF BOTH??

1. It is just as important for developmentally handicapped people to feel needed as anyone else.

t f both

2. You can't hurt the feelings of someone who is developmentally handicapped because they won't understand.

t f both

3.

People who are developmentally handicapped, can fall in love, get married, and have children.

t f both

4. If you offer help to someone who is doing a simple task very slowly, that person should be allowed to refuse your assistance.

t f both

5. Someone who is developmentally handicapped could give help to someone else.

t f both

6. It was once thought that developmentally handicapped persons could not feel pain or heat and cold because they did not understand this disability.

t f both

RESPONSES TO THE TRUE-FALSE DILEMMAS

1. true

   Everyone likes to feel someone appreciates whatever it is they are doing. Everyone likes to feel, as well, that the people around enjoy their company.

2. false

   We all have feelings regardless of how quickly we are able to learn. People with developmental handicaps can feel the difference between someone accepting them or rejecting them.

3. true

   Giving and receiving love has importance for everyone. Some people who are developmentally handicapped are able to build a lasting romantic relationship and some are capable of raising children.

4. true

   People like to do things for themselves as much as possible. If a person is able to make wise decisions, that person should also be able to say yes or no to offers of assistance.

5. true

   With the appropriate supervision, when necessary, people with developmentally handicaps can be trusted and relied upon to give assistance to others. The receivers of their help benefit, but the giver also gains an opportunity to be at the opposite end of the giving action for a change.

6. true

   We have come a long way since the days when developmentally handicapped persons were locked away in prison-like institutions. Our attitudes are still changing but the increasing number of people living in and contributing to their community is a good sign of progress.

WHAT'S YOUR OPINION??

1. Why do some people make fun of others who do not do certain things as well as most people do?

   Would the persons making fun act the same way if there was noone else around to hear them?

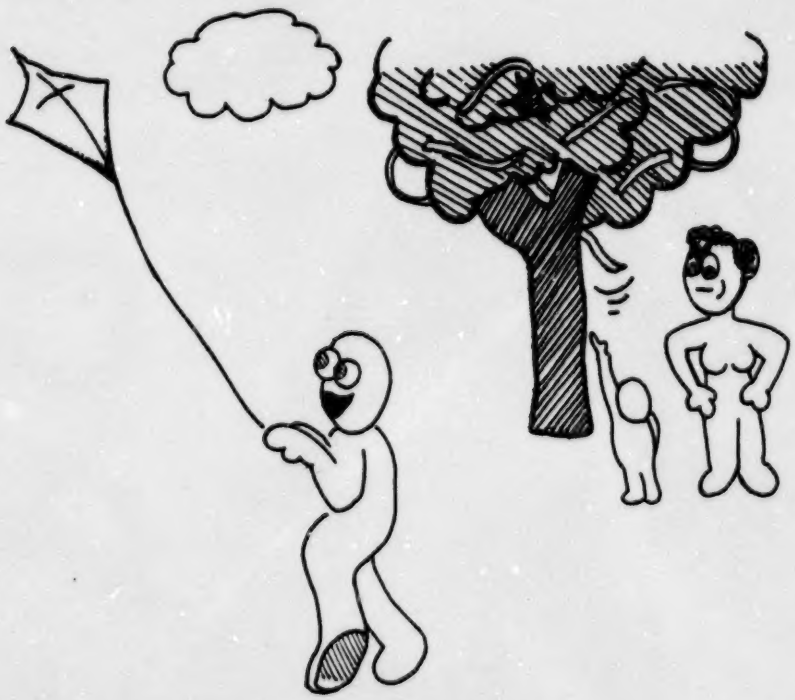
   What do you do in these situations?

2. Have you ever felt left out of the activities of a group of people? Did you think it was fair?

   How could you have been included?

3. Adults who behave immaturely because of a developmental handicap are often treated as children.

   Is this the proper way to act? Why?



ACTIVITIES

1. To identify more closely with the feelings a person has when left out by a group of people because they cannot do the activity as well as others,

   Ask students to list situations where this has been their personal experience.

   Ask students to recall stories they have read and television programs they have seen in which someone had this experience.

   What are the reasons a group of people would give for not including the person? Do you accept these reasons as being just?

   What are the feelings of the excluded person?

   Have you ever been so worried about people making fun of you that you couldn't do the things you knew you could do well?

2. To understand how attitudes affect someone who is developmentally handicapped,

   Ask students to prepare a number of questions they would like to pose directly to a person who has a developmental handicap and invite a guest with this disability to meet with the class. Try to find a person who would feel comfortable about discussing their personal experience of the different attitudes of people toward them

   a) from their family and relatives
   b) from their neighbours
   c) from their teachers and the students at school
   d) in their job
   e) from their friends

BACKGROUND INFORMATION

ON

DEVELOPMENTAL HANDICAPS

Developmental Handicaps (approximately 3% of population)

- are often caused by damage during pregnancy or at the time of birth
- may be due to deficiencies in social environment
- disability may become apparent during the developmental period
- degree of disability can be moderate to severe (small percentage)
- may or may not be identified as a problem depending upon values of the particular society (i.e. emphasis on academic achievement)
- cause problems in learning and in social adjustment
- cannot be cured but person's development can be advanced by proper stimulation and teaching of skills

A Glossary of

Terms and Issues

- What We Mean By What We Say -

Attitudes

- PUBLIC is often uncomfortable in the company of people with visual impairments
- APPROACH is frequently without respect for the person's right to dignity and self-control as much as possible
- PEOPLE are often isolated in social situation
- ARE INFLUENCED by media (television, films, literature) with images of people as incapable and not worthy of respect

Housing

- A SMALL percentage of persons require an institutional setting due to the severity of their handicap
- GROUP HOMES are very suitable for many persons where 3-6 adults share responsibilities of daily living with live-in or outside supervision
- NEIGHBOURHOODS are <u>rarely</u> affected in a negative way by the presence of group homes

Infant Stimulation

- THE EARLIER the better
- ALL of the senses need to be stimulated
- CHILD learns from stimulation
- CHILD needs to be talked to, to be held, to be touched and to touch other things, including people
- CHILD needs a variety of people and needs to come to recognize one or two constant people who care for him/her
- ENVIRONMENT for play should be stimulating and safe

(cont'd)

GLOSSARY (cont'd.)

Integration

- WHERE a child can cope, education in an integrated setting, given the necessary supports in the school, exposes the child to a stimulating environment and to a wide range of social interactions
- OTHER children become familiar with their needs and feel more at ease in their company

Sheltered Workshops

- MAY provide a permanent place of employment or may be a stage in the development of skills required in the competitive market
- CONTRACTS received from government and industry involving tasks such as sorting, labeling, packaging, assembling and collating
- PRESSURE has been mounted to ensure minimum wages are paid

RESOURCES

Organizations

Canadian Association for the Mentally Retarded
Kinsman, National Institute for the Mentally Retarded Building
York University Campus
4700 Keele Street
Downsview, Ontario
M3J 1I3 (416) 661-9611

Ontario Association for the Mentally Retarded
1376 Bayview Avenue
Toronto, Ontario
M4G 3A3 (416) 483-4348

Films

(Secondary)
Best Boy
110 minutes (National Film Board)
Philly at age of 52 with development at 5 or 6 tries to advance in anticipation of the death of his aging parents - very sensitively presented.

(Secondary)
David
28 Minutes (National Film Board)
A young man, David, with Down's Syndrome is portrayed as an actor and a public speaker who has shown triumphant determination to those who come to know him.

(Elementary)
He's Mentally Retarded (National Film Board)
8 minutes
Interaction of children with and without developmental handicaps toward developing a better understanding.

RESOURCES (cont'd.)

Books

(Secondary)
Keyes, Daniel, Flowers for Algernon, Bantam, 1970
A sensitively written diary of a young man whose developmental handicap significantly improves because of a medical experiment but which culminates in a reversal of the progress made.

(Elementary)
Ominsky, Elaine, Jon O., A Special Boy, Prentice-Hall: New Jersey, (1977)
A story about Jon O who was born with Down's syndrome and is consequently developmentally handicapped.

(Elementary)
Sobol, Harriet L., My Brother Steven is Retarded, MacMillan, 1977
Relates the conflicting feelings of a girl toward her older brother who is developmentally handicapped.

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Canadian Rehabilitation Council for the Disabled, Film List (5 pages).

Metropolitan Toronto Library Board, Audio-Visual Services, The World of the Handicapped, A Filmography in Honour of I.Y.D.P. 1981.

National Film Board, Catalogue of 16mm English Films Available in Canada. 1981, (145 pages).

National Film Board, Films About the Disabled, 1981 (18 pages)

Toronto Public Libraries, Community Agency Screening of Films for I.Y.D.P., 1981 (12 pages).

TV Ontario, Disabilities and Special Education, A Select List of Video Resources, 1981 (8 pages).

FILMS

Films can be borrowed free of charge from the National Film Board, some agencies and through the Film Departments of the Public Libraries.

Films on All Disabilities

Secondary Level

A Different Approach
21 minutes

A satirical film with top entertainers interspersed with various advertising approaches to dispelling myths.

Elementary Level

The Invisible Children
25 minutes

Gary Burghoff hosts this film based upon a presentation to a group of children by the Washington-based puppet troup of Kids on the Block.

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Karagianis, L. D.; Nesbit, W. C., Perhaps I'll Be in Your Class: Approaching Integration, Avalon Chapter Council for Exceptional Children, Newfoundland and Labrador; Faculty of Education, Memorial University of Newfoundland, 1979.

Lewis, Margaret, Be My Friend, Canadian Council on Children and Youth: Ottawa (colouring book on all disability areas).

Lifchez, Raymond et. al., Getting There, A Guide to Accessibility for Your Faculty, California Department of Rehabilitation, 1979.

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Ontario Crippled Children's Centre, Description of Disabilities Manual.

Pratt, Dallas, M.D.; Neher, Jack, Mental health is a family affair, Public Affairs Pamphlet No. 155, Public Affairs Committee, Inc., 1979.

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Learning Disabilities
Mental Handicaps
Mental Health Problems
Physical Handicaps
Sensory Handicap: Hearing
Sensory Handicap: Visual
Follow-Up Activities

Ross, Ruth Ellen; Freelander, I. Robert, Handicapped People in Society, University of Vermont, 1977.

Thurston, Sharon; Colwell, Bob; Wideman, Ron, Attitudes and the Disabled, A Values Education Approach, Scarborough Board of Education: Scarborough, 1980.

Toronto Transit Commission, Touchdown, a project on sensitivity awareness (accompanies film), 1982

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